

References

Give name, address, and telephone number of three work-related references **who are not related to you**.

1. _____
2. _____
3. _____

Employment Experience

Start with present or most recent position.

Please fill out all sections.

Employer		Dates Employed		Work Performed	
Address		From	To		
Telephone					
Job Title		Supervisor			
Reason for Leaving					
Employer					
Address		From	To	Work Performed	
Telephone					
Job Title		Supervisor			
Reason for Leaving					
Employer		Dates Employed			Work Performed
Address		From	To		
Telephone					
Job Title		Supervisor			
Reason for Leaving					
Employer		Dates Employed		Work Performed	
Address		From	To		
Telephone					
Job Title		Supervisor			
Reason for Leaving					

Applicant's Statement

I certify that the information contained in this application is true and complete to the best of my knowledge, and that I have not omitted any material information. In the event of employment, I understand that any misrepresentations or false information given in my application or interview will result in discharge.

I authorize investigation of all statements contained in this application for employment with the City of Albert Lea as may be necessary in arriving at an employment decision. It is understood and acknowledged that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. I further understand that criminal history checks may be conducted (after I have been selected for an interview, in the case of non-public safety positions) and that a conviction related to this position may result in my being rejected for this opening. I also understand it is my responsibility to notify the City in writing of any changes to information reported in this application for employment.

Applicant Signature

Date



Equal Employment Opportunity Information

The information asked of you will be used to evaluate our overall efforts in reaching all segments of the population. The following information is **VOLUNTARY and CONFIDENTIAL**. This information is **NOT A PART** of the application file and is **REMOVED** from the application when received by our office. The City of Albert Lea appreciates your cooperation in our efforts to ensure affirmative action and equal opportunity.

Name:

Date:

Position(s) for which you are applying:

Gender: Male Female

With which racial/ethnic group do you identify?

- Black or African American
- Hispanic or Latino
- American Indian or Alaskan Native through Tribal affiliation or community recognition
- Caucasian/White
- Asian
- Native Hawaiian or other Pacific Islander
- Two or more races

Disability status, defined as:

- 1) Has a physical or mental condition that substantially or materially limits a major life activity (such as walking, talking, seeing, hearing or learning);
- 2) Has a history of a disability (such as cancer that is in remission);
- 3) Is regarded as having such impairment.

Do you claim disability status? Yes No

REFERRAL SOURCE: *How were you made aware of this employment opportunity?*

- City Website
- City Twitter Account
- City Facebook Page
- Albert Lea Tribune
- Freeborn County Shopper
- Walk-In
- Radio
- Employee
- Other _____

Applicant Data Practices Advisory

The Minnesota Government Data Practices Act (Minn. Stat. §§ 13.01 – 13.90) includes two sections affecting applicants seeking employment with the City of Albert Lea. First, under “Rights of Subjects of Data” (Minn. Stat. § 13.04), when an applicant is asked to provide information about him/herself, the City must advise you of:

- The purpose and intended use of the data;
- Whether you may refuse or are legally required to supply the requested data;
- Any known consequences arising from your supplying or refusing to supply the data; and
- The identity of other persons or organizations authorized by State or Federal law to receive the data you provide.

Second under “Personnel Data” (Minn. Stat. §13.43) the following data on you as an applicant for employment by a public agency is automatically public:

- Your veteran’s status;
- Your job history;
- Your education and training;
- Your relevant test scores;
- Your rank on our eligibility list; and
- Work availability.

As an applicant, your name is considered private until you are certified as eligible for appointment to a position or are considered by the appointing authority to be a finalist for a position in public employment.

With the exception of the optional data requested, the data you provide is needed to identify you and you assist in determining your suitability for the position for which you are applying. The optional data is used in summary form by the city’s Affirmative Action Program to monitor protected class employment and meet federal, state and local reporting requirements. Furnishing the optional data requested about you is voluntary.

NOTICE TO MINORS: Minors from whom private data or confidential data is collected have the right to request that parental access to the private data be denied.

If you have any questions regarding your rights as a subject of data, please contact the City of Albert Lea Human Resources Department at 221 E. Clark Street, Albert Lea, MN 56007. **This information is subject to change consistent with subsequent amendments to the Minnesota Government Data Practices Act.**