

CITY OF HARMONY

APPLICATION FOR EMPLOYMENT

Community Center
225 Third Avenue SW
Post Office Box 488
Harmony, MN 55939-0488
Tel (507) 886-8122
Email:
cityoffice@harmonymn.gov

We welcome you as an applicant for employment! The City of Harmony is an equal opportunity employer and does not discriminate on the basis of race, color, creed, religion, national origin, sex, age, marital status, public assistance status, veteran status, disability or sexual orientation. Individuals are evaluated and selected solely on the basis of merit.

Complete all applicable areas. DO NOT MARK YOUR APPLICATION "SEE RESUME." You are encouraged to submit additional materials in support of your application. An incomplete application may reduce your opportunity for employment with the City of Harmony. Applications must be received by the application deadline. Late applications will not be considered.

(Please Type or Print in Ink)

TITLE OF SPECIFIC POSITION FOR WHICH YOU ARE APPLYING		DATE
_____		_____
<small>Title</small>	<small>Dept.</small>	
PERSONAL INFORMATION		
Name: _____		
<small>Last</small>	<small>First</small>	<small>Middle</small>
Address: _____		
Phone Number: _____		
<small>Home</small>	<small>Work</small>	
Are you eighteen (18) years of age or older?: <input type="checkbox"/> yes <input type="checkbox"/> no If no, your date of birth: _____		
Are you or have ever been employed by the City of Harmony?: <input type="checkbox"/> yes <input type="checkbox"/> no		
If yes, position: _____ Dates of employment: _____		
EMPLOYMENT DESIRED		
Type of employment desired: <input type="checkbox"/> full-time <input type="checkbox"/> part-time <input type="checkbox"/> seasonal/temporary		
Salary desired: _____ Date available: _____		
Are you employed now?: <input type="checkbox"/> yes <input type="checkbox"/> no If yes, may we contact your present employer?: <input type="checkbox"/> yes <input type="checkbox"/> no		
If no, explain: _____		
EDUCATIONAL INFORMATION		
Circle the highest grade completed:		
Elementary High School College Post Graduate		
1 2 3 4 5 6 7 8 9 10 11 12 GED 13 14 15 16 MA MS JD Ph.D.		
Did you graduate from high school?: <input type="checkbox"/> yes <input type="checkbox"/> no Name of high school: _____		
Name and location of college, university and/or technical schools		# of years attended
		Major/minor or study area
		Degree received

EMPLOYMENT HISTORY

Please give accurate and complete employment information. List your present or most recent experience first. Attach additional sheets if necessary using the same format. List only employment for last three years or last three jobs, whichever is greater. **DO NOT MARK YOUR APPLICATION "SEE RESUME" OR YOUR APPLICATION MAY NOT BE CONSIDERED!**

Present Employer

Employer: _____ Phone: _____ Dates of Employment: _____
Address: _____ From: _____ To: _____
Your title: _____ Total months: _____
Supervisor: _____ Supervisor's title: _____ Hours per week: _____
Number and types of positions you supervised: _____ Reason for leaving: _____

Principal responsibilities: _____ % of time: _____
1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

First Previous Employer

Employer: _____ Phone: _____ Dates of Employment: _____
Address: _____ From: _____ To: _____
Your title: _____ Total months: _____
Supervisor: _____ Supervisor's title: _____ Hours per week: _____
Number and types of positions you supervised: _____ Reason for leaving: _____

Principal responsibilities: _____ % of time: _____
1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Second Previous Employer

Employer: _____ Phone: _____ Dates of Employment: _____
Address: _____ From: _____ To: _____
Your title: _____ Total months: _____
Supervisor: _____ Supervisor's title: _____ Hours per week: _____
Number and types of positions you supervised: _____ Reason for leaving: _____

Principal responsibilities: _____ % of time: _____
1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

JOB RELEVANT VOLUNTEER OR UNPAID WORK EXPERIENCE

Kind of activity (Do not specify organization)	Work performed	Hrs/Mnth	From	To
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

DESCRIBE ANY ADDITIONAL EXPERIENCE OR TRAINING THAT QUALIFIES YOU FOR THIS POSITION

LIMITATIONS

Do you have any physical or health limitations which may affect your work performance: yes no If yes, please explain:

LICENSES AND CERTIFICATIONS

Current licenses/certificates held (indicate license number and expiration date): _____

Do you have a valid Minnesota driver's license: yes no Class: _____ License Number: _____

TO BE COMPLETED BY APPLICANTS FOR MANAGERIAL AND CLERICAL POSITIONS ONLY

Typing ability: yes no words per minute: _____

List specific computer hardware and software with which you have...

	Type	Length of Time
Training:	_____	_____
	_____	_____
Experience:	_____	_____
	_____	_____

TO BE COMPLETED BY APPLICANTS FOR LABOR, MAINTENANCE OR SKILLED TRADES ONLY

Apprenticeship(s): served or trades learned: _____

List specific equipment with which you have experience: _____

COMPLETED THIS SECTION ONLY IF YOU SERVED IN THE U.S. ARMED FORCES

Branch of Service: _____ Length of Active Duty: _____ Rank at Discharge: _____

Type of Discharge: _____

Describe duties and any special training: _____

If you wish to claim Veteran's Preference please attach a copy of your DD214.

REFERENCES

List three (3) people who you know well, preferably from a work environment. Do not refer to an acquaintance or relative.

Name	Address	Home Phone	Work Phone	Occupation
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

CONVICTIONS OR CRIMINAL RECORD

Have you served a sentence in jail or prison or been convicted of a crime for which a jail sentence could have been imposed? You may answer "no" if the conviction or criminal record has been annulled, expunged, sealed, set aside or purged, or if you have been pardoned pursuant to law: yes no

If yes, please attach a separate sheet with explanation. Information concerning this question will not be used to automatically bar you from employment, but may be used to direct your interests to areas less related to your area of conviction.

IMPORTANT FACTS CONCERNING INFORMATION PROVIDED ON YOUR APPLICATION

Minnesota law affects you as an applicant for employment with the City of Harmony. The following data is public information and accessible to anyone: veteran's status, relevant test scores, rank on eligibility list, education and training, job history and work availability. All other personally identifiable information is considered private, including, but not limited to your name, home address and telephone number. As an applicant, your name is considered private unless you are selected to be interviewed.

The information requested on the application is necessary, either to identify you or to assist in determining your suitability for the position for which you are applying. You may legally refuse, but refusal to supply the requested information will mean that your application for employment may not be considered.

If you are selected for employment with the City of Harmony, the following information will be public: name; actual gross salary; salary range; contract fees; actual gross pension; the value and nature of employer paid fringe benefits; the basis for and the amount of any added remuneration, including expense reimbursement in addition to salary; position title; position description; education and training background; previous work experience; date of first and last employment; the status of any complaints or charges against the employee whether or not the complaint or charge resulted in a disciplinary action; the final disposition of any disciplinary action and supporting documentation; work location; work telephone number; badge number; honors and awards received; payroll time sheets or other comparable data entry that are only used to account for an employee's work time for payroll purposes, except to the extent that release of time sheet data would reveal the employees reason for use of sick or other medical leave or other non-public data; city and county of residence. Any thing not previously listed which is placed in your application folder or your personnel file (such as medical records, letters of recommendation, resumes, etc.) is made private information by law.

I understand that any falsified information or significant omissions on either the application or during my interview may disqualify me from further consideration for employment and may be justification for dismissal. I authorize investigation of all statements contained in this application or made during the interview for employment as may be necessary in arriving at an employment decision. I release such employers and individuals from all liability for damages whatsoever that may arise from furnishing this information. I further understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.

Applicant's Signature

Date

POLICE APPLICANTS ONLY

In consideration of being permitted to apply for the position herein, I voluntarily assume all risks in connection with my participating in any tests the City of Harmony deems necessary to determine my fitness and eligibility and I release and forever discharge the City of Harmony, its officials, officers, and employees from any and all claims for any damage or injury that I might sustain.

Applicant's Signature

Date

THIS SPACE FOR OFFICE USE ONLY