Date Received:	
	(Office Use Only)

APPLICATION FOR EMPLOYMENT FARIBAULT COUNTY

It is the policy of Faribault County to provide equal opportunity to all employees and applicants for employment. Faribault County will not discriminate against or harass any employee or applicant for employment because of race, color, creed, religion, national origin, sex, disability, age, marital status, gender, sexual orientation, veteran status, familial status, status with regard to public assistance or other protected class status. Our employment decisions are made on the basis of individual ability and merit.

Position Applying For

Applicants Name		□ full–time	□part-time
Last Name	First	Middle)
Address			
City	St	ateZip	
Cell Phone	Home Phone		
Are you under 18 years of age? yes no	Email address:_		
Do you have any special needs which may nec application/interview process? yes no requested:			nodations

Guidelines for Understanding the Employment Process and Completing the Application Form:

To ensure that your application will be accurately processed, please review the following:

- 1. Please print or type when completing this form.
- 2. **EITHER:** (a) Complete a separate application form for each position opening you apply for, following instructions completely and signing your application where required, or:
 - (b) Contact the Faribault County Central Services office in writing and request that a previously completed application be used to apply for the current position opening.
- 3. Be specific and complete when filling out the Employment History section; application forms that are incomplete will be removed from further consideration. If additional space is needed to complete your employment history, extra sheets are available from the Faribault County Personnel Office.
- 4. Applications received after the closing date will not be accepted.
- 5. Faribault County strongly encourages County employees to live within the county they serve.
- 6. Recruitment of employees will be administered by the Central Services Office. At a minimum, all openings will be advertised in the official newspaper of Faribault County and on the county website at www.co.faribault.mn.us.
- 7. When the stated application deadline is past, all applications will be reviewed and evaluated to determine how well each applicant is suited for the position opening.
- 8. The Central Services Office will schedule interviews with the best qualified applicants.
- 9. Interviews will be conducted with the Central Services Office and the appropriate department head. Others may be involved as needed. They will select the best applicant for the position after a successful background check.

10. The Central Services Director will inform the successful applicant and arrange a starting date. Applicants will be notified by mail that the position has been filled. If you have any questions concerning completion of your employment application or the employment procedures for Faribault County, please call the Central Services Director at (507) 526-6225.

Employment History

- Faribault County uses a 100-point system to assign value to the experience and training that relates most closely to the position you are applying for. Your experience and training will be scored using the experience and training value system designed for this position. Those applicants (typically the top 6 to 8) with the highest points will be interviewed for the position.
- In order to receive the correct points and credit for the knowledge and skills you have acquired, it is absolutely necessary that you are specific when describing these skills. Do not use a single general statement to describe the duties you have performed. List each major duty performed for each position held within the past five years. Whether you are describing your experience as a clerical worker, truck driver, or social worker, list each duty separately and be specific. Describe duties in specific terms such as "performed word processing using WordPerfect" or "created spreadsheets using Lotus 1-2-3/Excel". Statements such as "performed general clerical work", "operated heavy equipment", or "handled a foster care case load" are all too general.
- Please be very specific in stating the dates of employment and number of hours you worked per week for each job experience indicated. We need this information to properly score your experience. If hours worked per week vary, please use the average number of hours worked per week.
- Complete the boxed-in "Length of Employment" section for positions held within the past five years. But, please do include all of your relevant work experience in the Employment History section.
- Please give accurate, complete employment information. List your present or most recent experience first. Use plain paper if you need extra space to list your job experiences.

Criminal Background Information

Faribault County will request information regarding criminal history in the event that you become a finalist for the position which you are applying. For certain positions, criminal background information will be requested during the application stage. Further, Faribault County may conduct a criminal background check on individuals upon making a contingent job offer. A criminal check will be conducted and no offer of employment shall become final until receipt of the results of the criminal background check from the BCA or other agency, the content of which is acceptable to Faribault County, and formal approval by the appointing authority.

Work Experience

*	•		• 1	For example: comput, power tools, etc.	ter programs
experienced in w	ora, Excel, Publi	sner,etc), constr	uction equipment	i, power tools, etc.	

Do not mark your application "Please see resume".

Length of Employment:						
-						
n: To:						
mo/yr mo/yr						
rsMonths						
/hrs per week						
/						
YesNo						
						
gth of Employment:						
gth of Employment: n: To:						
gth of Employment: m: To: mo/yr mo/yr						
gth of Employment: n: To:						
gth of Employment: m: To: mo/yr						
gth of Employment: n: To: mo/yr mo/yr ll Time: rs Months						
gth of Employment: n: To: mo/yr mo/yr ll Time: rs Months						
gth of Employment: m: To: mo/yr						
gth of Employment: n: To: mo/yr mo/yr Il Time: rs Months /hrs per week						
gth of Employment: n: To: mo/yr mo/yr Il Time: rs Months /hrs per week						

Do not mark your application "Please see resume".

Previous Employer	Length of Employment:
Employer:	
Address:	From: To:
Supervisor's Name:	mor yr
Your Job Title:	37 36 4
Reason for Leaving or desiring to leave:	
Principal Responsibilities (be complete):	/hrs per week
1. 2.	
3.	
4	
5	
May we contact this employer regarding your wo	- -
May we contact this employer regarding your wo	rk record?YesNo Length of Employment:
May we contact this employer regarding your wo Previous Employer Employer:	rk record?YesNo Length of Employment:
May we contact this employer regarding your wo Previous Employer Employer: Address:	Length of Employment:
May we contact this employer regarding your wo Previous Employer Employer: Address: Supervisor's Name:	Length of Employment: From: mo/yr Total Time:
May we contact this employer regarding your wo Previous Employer Employer: Address: Supervisor's Name: Your Job Title:	Length of Employment: From: mo/yr Total Time:
May we contact this employer regarding your wo Previous Employer Employer: Address: Supervisor's Name:	Length of Employment: From: mo/yr Total Time:
May we contact this employer regarding your wo Previous Employer Employer: Address: Supervisor's Name: Your Job Title:	Length of Employment: From: To: mo/yr mo/yr Total Time: Years Months
Previous Employer Employer: Address: Supervisor's Name: Your Job Title: Reason for Leaving or desiring to leave: Principal Responsibilities (be complete):	Length of Employment: From: To: mo/yr mo/yr Total Time: Years Months //hrs per week
Previous Employer Employer: Address: Supervisor's Name: Your Job Title: Reason for Leaving or desiring to leave: Principal Responsibilities (be complete): 1. 2.	rk record?YesNo Length of Employment: From:To: mo/yr mo/yr Total Time: YearsMonths /hrs per week
Previous Employer Employer: Address: Supervisor's Name: Your Job Title: Reason for Leaving or desiring to leave: Principal Responsibilities (be complete): 1. 2. 3.	rk record?YesNo Length of Employment: From:To: mo/yr mo/yr Total Time: YearsMonths /hrs per week
Previous Employer Employer: Address: Supervisor's Name: Your Job Title: Reason for Leaving or desiring to leave: Principal Responsibilities (be complete): 1. 2.	rk record?YesNo Length of Employment: From: To: mo/yr mo/yr Total Time: Years Months /hrs per week

Education

Educational Institution	Name & Address of Institution	Course of Study (Major/Minor)	Did you Graduate?	Diploma or Degree Awarded
High School				
College				
College				
Other (specify)				

Drivers Licenses

Please indicat	e if you currently hav	e any of the	following driv	er's licenses, only if required for
this position.				
	Minnesota Class A			
	Minnesota Class B		•	
	Minnesota Class D		or equivalent	

Please include a photocopy of your license if the position requires a driver's license.

Other Licenses

Please list any other licenses, registrations or certifications that are required or pertinent to the position you are applying for. If this licensing, etc. is required for the position, and you fail to include a photocopy of it with your application form, your name will be removed from further consideration for the position. If this licensing is not required for the position, but you feel it is relevant and may be an item for which we are awarding points, a Photocopy must be included with your application for credit to be awarded.

License or Certificate	Licensing Agency	Expiration Date	License #

Professional References

Li	ist	neoi	nle i	vou l	know	well.	prefer	ably	from a	work	environment	. Do 1	not refer i	to an acc	uuaintance	or relative.
_	LDC	Ped	PIU.	,	LLIIO "	,, 011,	preser	acij	II OIII G	, ,, OIII	em i monniem		ilo t i o i o i	co an acc	1 admiration	or relative.

Name	Addre	ess
Home Phone	Work	Occupation
Name	Address	
Home Phone	Work	Occupation
Name	Address	
Home Phone	Work	Occupation

Have You . . .

- 1. Thoroughly read this entire application?
- 2. Signed this application in all required places:
 - (a) the Tennessen Warning
 - (b) the Employee Certification

This application will not be accepted without all the necessary signatures.

- 3. Provided sufficient information so that proper credit for training and experience is given?
- 4. Completed and signed the claim for Veterans Preference if applicable to you? Also, a copy of your DD Form 214 is to be attached to the Claim Form at the time of application to determine your eligibility for points. Your DD 214 will NOT be accepted after the position closing date.
- 5. Have you included copies of all licensing?

Employee Certification

Before signing this application, read the following waiver carefully.

- 1. I have read and understand the job posting for the position for which I am applying and certify that the answers given in this application are true and complete to the best of my knowledge.
- 2. I authorize all references, current and previous employers to release job-related information with this written request of the Faribault County Central Services Office. However, I understand that if, in the Employment History section, I have answered "No" to the question "May we contact this employer?" contact with the employer will not be made without my specific authorization.
- 3. I authorize the Faribault County Central Services Office to verify all referenced information on this application to determine whether or not I am qualified for the position for which I am applying.
- 4. I understand that providing false or misleading information on this application may be grounds for future termination should I be hired.

Printed Name	
Signature	Date Signed

Please return this completed application form to:

Faribault County Courthouse -Central Services Office 415 North Main Street, P.O. Box 130 Blue Earth MN 56013-0130

Phone: 507/526-6225 Fax: 507/526-6227 Hours: 8:00 a.m. - 4:30 p.m., Monday through Friday

Tennessen Warning

In accordance with the Minnesota Government Data Practices Act, Faribault County is required to inform you of your rights as they relate to the private information collected from you. Private data is information, which is available to you, but not to the public; the personal information we collect about you is private. Minnesota Statutes 13.04 and 13.43 are two sections that govern what affects you as an applicant for employment at Faribault County. All data collected is considered private except for the following:

- 1. Your veteran's status
- 2. Relevant test scores.
- 3. Your rank on our eligibility list.
- 4. Your job history.
- 5. Your education and training.
- 6. Your work availability.

Your name is considered private information; however, if you are selected to be interviewed as a finalist, your name becomes public information. The data supplied by you may be used for such other purposes as may be determined to be necessary in the administration of personnel policies, rules and regulations of Faribault County. Furnishing social security numbers, date of birth (unless a minimum age is required), sex, age group, and disability date is voluntary, but refusal to supply other requested information will mean that your application for employment may not be considered. Private data is available to you, appropriate county employees, and others as provided by state and federal law who have a bonafide need for the data. Public data is available to anyone requesting it and consists of all data furnished in the application for employment which is not designated in this notice as private data. Except for race, sex, age, and disability date, the information you give us about yourself is needed to identify you and to assist the Faribault County in determining your suitability for the position for which you are applying. Race, sex, age, and disability data are used in summary form by Faribault County to monitor protected class employment and to meet federal, state and local reporting requirements.

Data Practices Act.		
Applicant's Printed Name		
Applicant's Signature	Da	te

I declare that I have read and understand the information given above regarding the Minnesota

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Faribault County Affirmative Action Applicant's Information

To All Applicants:

The following information in no way affects you as an individual applicant. This information will be used to find out how effective our recruitment efforts are in reaching all segments of the population and in validation of our selection methods. The information will not be maintained in personnel files and it will not be made available to any person involved in decisions affecting an individual's appointment or promotion to a position. Although <u>providing this information is voluntary</u>, it is important that all applicants answer these questions so that we may take steps to prevent discrimination in the recruitment and selection of employees for public service.

Position applying for:											
Instruction voluntary.	ons: Check the choice that answers each of the following questions. Providing this is the sex are you?FemaleMale following, of what racial/ethnic group do you consider yourself? merican Indian/Alaskan Native frican American sian or Pacific Islander anish or Mexican American hite										
1. What so	ex are you?	Female	Male								
An Afi As: Spa Wh	nerican Indian/Ala rican American ian or Pacific Islan anish or Mexican nite	nskan Native		lf?							
3. How di	d you learn about	this job opening?									
Hi Co Co Sta Wa Job Po	cal County Paper gh School ollege and/or Stude ounty Employee ate Job Service alk-In o Website, such as sting on County's her:	s Indeed									

Faribault County Veteran's Preference Claim Form

The eligibility requirements for veteran's preference are listed below. Read them carefully to see if you qualify. If you do wish to receive preference, be sure to complete this section. Anyone eligible for receiving a monthly veteran's pension benefit based exclusively on length of military service is not eligible. Providing the information in this section is voluntary.

Veteran Eligibility for Open Competitive Position (Five {5} Points)

- 1. Have a discharge under honorable conditions from active military service.
- 2. Be a citizen of the United States or a resident alien.
- 3. Have served on active duty for at least 181 consecutive days.
- 4. Have been separated by reasons of disability incurred while serving on active duty.
- 5. Have met the minimum active duty requirements for eligibility for federal veterans benefits.

Disabled Veteran Eligibility for Open Competitive Position (Ten {10} Points)

Must have a compensable service connected disability as adjudicated by the United States Veteran's Administration or by the Retirement Board of the several branches of the armed forces and the disability must exist at the time preference is claimed.

Disabled Veteran Eligibility for Promotional Position (Five {5} Points)

Must, at the time of election to use preference, be entitled to disability compensation for a permanent service-connected disability rated at 50% or more and the position for which you are applying must be the first promotion after entering public employment.

Eligibility as a Spouse of a Deceased or Disabled Veteran

Must be a spouse of either a deceased veteran or the spouse of a disabled veteran who, because of a disability, is unable to qualify for the particular position due to his/her disability and who would have or does meet the criteria for one of the above-listed preferences.

ALL APPLICANTS CLAIMING VETERAN'S PREFERENCE MUST ATTACH A COPY OF HIS/HER DD214. FAILURE TO DO SO MAY RESULT IN LOSS OF VETERAN'S PREFERENCE ELIGIBILITY.

Name of Veteran (last, first, middle)	Date of Birth					
Name of Applicant—if different than veteran (la	ast, first, middle)					
Address	City			State	Zip	
To be Completed by Veteran or Spouse o	of Deceased Ve	teran			_	
Are you a U.S. Citizen or resident Alien? Y	es 1	No				
Were you honorably discharged from milita			No			
Were you separated from military service Yes No	after serving a	active duty	y for at lea	st 181 consecut	ive days?	
Do you currently have a compensable servi seeking your first promotion with Faribault	County, what i				ıd you are _	
For spouse of deceased veteran, date of dear	th?					
Signature of Veteran	nature of Veteran Social Security Number				Date	
If spouse of Disabled Veteran, please answe	er the following	:				
If spouse is disabled, please explain why yo	our spouse does	not qualif	y for this po	osition:		
Claim Number (if disabled)				State Claim is 1	Filed in	