

INSTRUCTIONS FOR COMPLETING APPLICATION FORM

If you do not provide complete information, you may receive an inaccurate score or be removed from further consideration. So that your application will be processed accurately, please do the following:

- 1. Complete application accurately and legibly.
- 2. Work Experience Section: List your present or most recent experience first, including all job-related volunteer and/or unpaid experience.

If you attach additional information sheet(s), include <u>all</u> the information requested on the application, i.e., organization, position title, length of employment, total time, hours per week, major activities and percentages. If hours per week vary, please use the average number of hours per week.

Resumes are accepted if they are required per the job announcement. Please do not submit personal information, i.e. birth date, marital status, activities, etc. This information will automatically be removed from your resume.

To receive proper credit under work experience list the five most important and/or time-consuming duties on <u>each</u> position. Do not include unimportant job duties which are performed only occasionally.

Do not write "see prior applications."

- 3. Your application and supporting material becomes the property of the Proctor Police Department and cannot be returned.
- 4. The only adjustments you may make on your application after the closing date for filing is your name, address, telephone number or availability information.

All applicants for police officer shall be subject to a thorough background investigation including fingerprinting. Employment of any applicant for police officer shall depend upon his or her successful completion of a written test, a physical (medical) examination, a psychological evaluation, and an oral interview.



APPLICATION FOR EMPLOYMENT

The City of Proctor Police Department 100 Pionk Drive Proctor, MN 55810

Phone: (218) 624-7788

Position Applying For			May we call	you at wor	k? □Yes □No
Last Name		First Name		Middle Na	ame
Street Address				Home Pho	one
City		State	Zip	Cell Phone	e
		Are you 18 year or older?	S Yes No		
Email Address				Work Pho	ne
Are you a United States do you have permissior		es No			
country?			OST Number (If availa	ble)	Eligible to be POST licensed Yes*/ No
Did you graduate from	hiah school or receive		L EDUCATION		*Please attach eligibility letter.
z.a yea g.aaaacee		gh School/University/Colle		ssional	, , , , , , , , , , , , , , , , , , ,
Name	School Lo		Degree/Certificate	,5101141	Major/Minor/ Graduate Yes/No
Tunic			2 09. 00, 00		Major/Willion Graduate reservo
		RECOR	RD		
	n a separate sheet and	other than a minor traffic of attach. You must report a	offense?	s determine	d they are not Yes No
ATTENTION - THIS STATE FOLLOWING STATEMENTS I understand and agree th	MENT MUST BE SIGNES CAREFULLY BEFORE YO at I may be required to ta		minations as a conditio	n of hiring or	ABLE BY LAW. READ THE rontinued employment. I agree to nts or employees from any claim
arising in connection with I hereby authorize the City application, including, but current and previous emp	the use of such test(s). of Proctor and any agen not limited to, my recor- loyers (unless noted other	nt acting on its behalf to cond ds maintained by any educat erwise on the reverse side of 1	luct an inquiry into any ional institution relatin form) to release any inf	job related ing to academi formation in t	nformation contained in this ic performance. I hereby authorize all
faith. I understand that an	y false information or on	mission of information from th	nis application may be	cause for reje	dge and belief, and are made in good ection, or dismissal if employed. I the meaning of that warning.
_	Signature o	f Applicant	Date		

EMPLOYMENT HISTORY



Provide a complete description of all qualifying experience, paid and/or volunteer, starting with the most recent position held. (Please refer to instructions on page 1.)

May we contact your present employer? \square Yes \square No

May we contact your previous emp	loyer? [Yes	Nc
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Name of Employer			Email Address	
Address (City, State, Zip)				
Phone Number			Position	
Duties				
Dates of Employment (Fro	om)	(To)	Name of Supervi	sor
Reason for Leaving				
Name of Employer			Email Address	
Address (City, State, Zip)				
Phone Number			Position	
Duties				
Dates of Employment (Fro	om)	(To)	Name of Supervi	sor
Reason for Leaving				
Name of Employer			Email Address	
Address (City, State, Zip)				
Phone Number			Position	
Duties				
Dates of Employment (Fro	om)	(To)	Name of Supervi	sor
Reason for Leaving				
Name of Employer			Email Address	
Address (City, State, Zip)				
Phone Number			Position	
Duties	-			
Dates of Employment (Fro	om)	(To)	Name of Supervi	sor
Reason for Leaving				

EMPLOYMENT HISTORY



Provide a complete description of all qualifying experience, paid and/or volunteer, starting with the most recent position held. (Please refer to instructions on page 1.)

May we contact your previous employer?	Yes	∐No	

Name of Employer			Email	Address	
Address (City, State, Zip)					
Phone Number			Positi	on	
Duties					
Dates of Employment (Fro	om)	(To)		Name of Superviso	r
Reason for Leaving					
Name of Employer			Email	Address	
Address (City, State, Zip)					
Phone Number			Positi	on	
Duties					
Dates of Employment (Fro	om)	(To)		Name of Superviso	r
Reason for Leaving					
Name of Employer			Email	Address	
			LIIIaii	Address	
Address (City, State, Zip)				[
Phone Number			Positi	on	
Duties					
Dates of Employment (Fro	om)	(To)		Name of Superviso	r
Reason for Leaving					
Name of Employer			Email	Address	
Address (City, State, Zip)					
Phone Number			Positi	on	
Duties					
Dates of Employment (Fro	om)	(To)		Name of Superviso	r
Reason for Leaving					



EMPLOYMENT HISTORY

Provide a complete description of all qualifying experience, paid and/or volunteer, starting with the most recent position held. (Please refer to instructions on page 1.)

Name of Employer	Email Address
Address (City, State, Zip)	
Phone Number	Position
Duties	
Dates of Employment	(From) Supervisor
Reason for Leaving	
	VOLUNTEER OR UNSALARIED EXPERIENCE List here any volunteer of unpaid experience, starting with the most recent position held. May we contact someone from the company or organization? Yes No No
Name of Organization	
Address (City, State, Zip	
Phone Number	
Duties	
Name of Organization	
Address (City, State, Zip	
Phone Number	
Duties	
	Please list below any certifications, licenses, trainings or awards you may have received



REFERENCES (List 3)

Name, Address, Telephone

1					
2					
3					
MILITARY SERVICE					
Are you a veteran? Yes No Branch of Service	Current Military Status				
What was your area of specialization?					
CLAIM FOR VETERAN'S PREFERENCE: To be considered for veteran's preference, date of entry into the military service must be prior to December 31, 1976, pursuant to Minnesota Statutes 43A.11, Subd. 1. A person who is eligible to receive a monthly veteran's pension based on length of service will not qualify for preference. To qualify for preference you must have been separated under honorable conditions from any branch of the armed forces of the United States after having served on active duty of 181 consecutive days or by reason of disability incurred while serving on active duty, and be a United States citizen or be the spouse of a deceased veteran or be the spouse of a disabled veteran who, because of such disability, is unable to qualify or earn a living. Do you qualify for veteran's preference based on the eligibility requirements above? (If yes, you will be Yes No					

TENNESSEN WARNING

This application is to assist in the process for possible employment. Certain information requested on the application is private, that is, it may be released only to you or to city departments where you may be considered for employment. Names of applicants become public when certified as eligible for appointment to a vacancy or when the applicant is considered by the appointing authority to be a finalist for a position.

Private Data	Why we ask for it	Are you legally	What may happen if you do not provide the required information?
Name	To distinguish you from all other applicants.	Yes	Failure to provide information may be cause for rejecting an application
Social Security Number	To distinguish you from all other applicants and to make processing more efficient.	No	
Street Address	To be able to send you notices.	Yes	Failure to provide information may be cause for rejecting an application
Telephone	To be able to contact you to determine availability interviews.	No	We may not be able to employ you in certain jobs where you may be required to come to work on short notice.
Conviction Record	To determine whether we may legally accept an application from you and to determine whether your record may be a job related conviction.	Yes	We will not be able to make determinations required by law.