



# COTTONWOOD SOIL AND WATER CONSERVATION DISTRICT

## Application for Employment

<http://www.cottonwoodswcd.org/>

We welcome you as an applicant for employment with Cottonwood SWCD. It is our goal to develop a work force of competent, caring people to perform the many important and valued duties within county government.

Name (Last, First, MI) _____	Home Phone _____
Mailing Address _____	Message/Cell Phone _____
City, State, Zip _____	Work Phone _____
	E-mail Address _____
Title of specific position for which you are applying _____	

### BEFORE COMPLETING THE APPLICATION FORM, PLEASE READ THE FOLLOWING NOTICES TO APPLICANTS.

In accordance with the Immigration Reform and Control Act of 1986, Cottonwood SWCD hires only U.S. Citizens and lawfully authorized alien workers. If hired, you will be required to provide written documentation of citizenship or legalized alien program. Failure to provide written documentation will result in dismissal.

Cottonwood SWCD is an equal opportunity employer and does not discriminate on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, sexual orientation, or age.

### **HOW THE MINNESOTA DATA PRACTICES ACT/TENNESSEN WARNING AFFECTS YOU**

In accordance with the MN Government Data Practices Act, Cottonwood SWCD is required to inform you of your rights as they pertain to the information you provide when filling out this Application for Employment.

Under the Act, the following information is automatically available to the public:

- |                              |                         |                                   |
|------------------------------|-------------------------|-----------------------------------|
| 1. Whether you are a veteran | 3. Relevant test scores | 5. Your education and training    |
| 2. Your work availability    | 4. Your job history     | 6. Your rank on our eligible list |

Your name is considered private unless you are selected to be interviewed for the position. If you are hired, you will be notified of the additional information about you that will become public.

Any information you provide in your application, which is not listed above is classified as private data. Private data will not be shared with anyone but those members of our staff who must use it to process your application and to conduct normal SWCD business, without your informed consent or a valid court order. Certain federal or state agencies may also be authorized by state or federal law to receive information from your file to investigate specific complaints of employment discrimination.

### **PURPOSE AND USES**

The information requested is used for the following reasons:

- to distinguish you from other applicants
- to meet federal and state reporting requirements
- to make processing more efficient
- to enable us to ensure your rights to equal opportunity
- to enable us to contact you when additional information is required, to send you notices and/or to schedule interviews

### **EFFECTS OF NON-DISCLOSURE**

You are not legally required to supply any of the data we ask for on your application, but if you choose to withhold it, your application will not be complete, and you may not be considered for employment. If you do provide the data, your application will be considered, and if you are employed, the information you have given us will become part of your employee record. Any falsified information on the application form will result in termination.

**I have read the information above on documentation requirements, Cottonwood SWCD's non-discrimination policy and the MN Data Practices Act.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**If you have any special needs which may necessitate accommodation in the application or interview process, please contact the SWCD District Administrator to make a request.**

**IMPORTANT!** Complete all applicable areas. An incomplete application may reduce your opportunity for employment with Cottonwood SWCD. **Applications must be received by the application deadline. Late applications will not be considered.**

(Please Type or Print in Ink)

List all other names under which you have been employed or under which your employment or education records may be found:

\_\_\_\_\_

When will you be available for employment? (Check one of the following)

Now       Beginning \_\_\_\_\_       Upon \_\_\_\_\_ weeks notice to current employer

Your employment may involve occasional use of a public vehicle. Do you have a valid driver's license?     Yes     No

Class \_\_\_\_\_

Are you fluent in a language other than English (including sign language)?     Yes     No

If yes, please specify \_\_\_\_\_

**EDUCATION**

Did you graduate from high school or receive a GED?     Yes     No

Name and location of last high school attended \_\_\_\_\_

*Do not list dates of attendance for high school.*

NAME AND LOCATION OF COLLEGE, UNIVERSITY, TECHNICAL SCHOOL	# OF YEARS COMPLETED	DID YOU GRADUATE?	MAJOR COURSES OF STUDY	CERTIFICATE OR DEGREE

**WORK EXPERIENCE**

List your present or most recent experience first. Please give accurate, complete full-time and part-time employment record. Attach an extra sheet if necessary. **Do not write "SEE RESUME"**.

Employer Name \_\_\_\_\_

Length of Employment:

Address \_\_\_\_\_

From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Phone Number \_\_\_\_\_

Total: Years \_\_\_\_ Months \_\_\_\_

Your Job Title \_\_\_\_\_

Full-time     Part-time

Supervisor's Name \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Description of job duties – **Be Complete** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer Name \_\_\_\_\_

Length of Employment:

Address \_\_\_\_\_

From \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Phone Number \_\_\_\_\_

Total: Years \_\_\_\_ Months \_\_\_\_

Your Job Title \_\_\_\_\_

Full-time     Part-time

Supervisor's Name \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Description of job duties – **Be Complete** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer Name _____ Address _____ Phone Number _____ Your Job Title _____ Supervisor's Name _____	Length of Employment: From ___/___/___ to ___/___/___ Total: Years ___ Months ___ <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Reason for Leaving: _____
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Description of job duties – **Be Complete** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employer Name _____ Address _____ Phone Number _____ Your Job Title _____ Supervisor's Name _____	Length of Employment: From ___/___/___ to ___/___/___ Total: Years ___ Months ___ <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time Reason for Leaving: _____
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Description of job duties – **Be Complete** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cottonwood SWCD may contact the employers listed unless you indicate those whom you do not want us to contact.

DO NOT CONTACT: \_\_\_\_\_

<b>JOB RELEVANT VOLUNTEER AND UNPAID WORK EXPERIENCE</b>			
KIND OF VOLUNTEER ACTIVITY	MAJOR RESPONSIBILITIES	# OF HOURS/ MONTH	HOW LONG? From To

Describe any additional experience or training that qualifies you for this position? (Be Specific)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What machines or equipment do you operate, i.e. computers, construction equipment, tools, etc?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List computer hardware and software training and experience.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## LICENSURE

List all other current licenses, registrations, or certificates relevant to the position for which you are applying. All applicable licenses or certifications must be received in the Personnel Office prior to employment commencing. If hired, you remain responsible for ensuring that all applicable licenses remain in effect.

License/No.

Issued By

Date

Expiration

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## REFERENCES

These should be individuals in a position to discuss your qualifications for the position you seek. Include especially managers, directors, or heads of departments under whom you have worked. Indicate any who are related to you. The Cottonwood SWCD reserves the right to contact all prior employers, educational institutions, or institutions where you have volunteered in addition to references listed below.

NAME	PRESENT ADDRESS	PHONE NUMBER	OCCUPATION AND RELATIONSHIP

## CRIMINAL BACKGROUND INFORMATION

The Cottonwood SWCD may conduct a criminal background check on individuals upon making a contingent job offer. If a criminal check will be conducted, no offer of employment shall become final until receipt of the results of the criminal background check are received and the content is accepted by the Cottonwood SWCD and its Board of Supervisors.

## VETERAN STATUS

Are you an honorably discharged veteran of the armed forces of the United States or are you otherwise eligible to claim Veteran's Preference Points? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you wish to claim Veteran's Preference Points? Yes \_\_\_\_\_ No \_\_\_\_\_

If you are a disabled veteran and wish to claim additional points, please check here \_\_\_\_\_

(A copy of your DD-214 must be attached in order to claim veteran's preference.)

## PRIOR EMPLOYMENT

Have you ever been discharged or forced to resign from prior employment, other than in relation to a human rights charge or lawsuit in which you were the claimant/plaintiff? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, please describe the circumstances: \_\_\_\_\_

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## UNEXCUSED ABSENCE FROM WORK

How many days were you inexcusably absent from work during the preceding three (3) years other than absences due to illness or injury of you or your immediate family? \_\_\_\_\_

## PERSONAL STATEMENT

Please indicate why you are interested in the position and what you hope to accomplish if selected.

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### TO BE READ AND SIGNED BY THE APPLICANT

**I certify** that the answers I have given on this application are true and correct to the best of my knowledge. I understand that any false or misleading information provided, or any omission or concealment of facts, will disqualify me from consideration for employment, and constitutes grounds for my immediate dismissal should I be employed by the SWCD.

**I understand, acknowledge and agree** that no offer of employment is valid or binding until formal approval by the SWCD Board or the appointing authority referenced in the job description and that until such approval that the SWCD shall not be liable for any reliance on any oral or written offers of employment made to me.

In connection with this application **I hereby authorize** any and all current and former employers, organizations where I have volunteered ("volunteer organizations") and references named in this application, or any agent of such a former employer or volunteer organizations, to release to the SWCD and its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking and any other employment or related information, both public and private, in their possession. I understand that the SWCD will use this information to determine my fitness/qualifications for the position I am seeking.

This authorization expires one year from the date of my signature, below.

**I hereby release** the SWCD and all former employers, volunteer organizations and references listed herein and any and all agents acting on behalf of said SWCD, former employers, volunteer organizations or references, for any and all liability of whatever nature by reason of requesting or providing such information.

**Applicant's Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Thank you for applying for employment with Cottonwood Soil and Water Conservation District. Your application will be placed in competition with others that have applied for this position.**

### COTTONWOOD SWCD OFFICE USE ONLY

Posting Date _____	Closing Date _____
Arrange Interview    Yes _____ No _____	Rejection Letter Sent _____
Employed                Yes _____ No _____	Date of Employment _____
SWCD Board Authorization Date _____	
Position Title _____	Department _____
Starting Step and Range _____	
Date completed by SWCD Personnel _____	

**Cottonwood Soil and Water Conservation District  
Application for Employment**

**EMPLOYMENT AND APPLICANT RECORDS AND  
RELEASE OF LIABILITY**

In connection with this application I hereby authorize any and all current and former employers, organizations where I have volunteered (“volunteer organizations”) and references named in this application, or any agent of such a former employer or volunteer organizations, to release to the Cottonwood SWCD and its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking and any other employment or related information, both public and private, other than “consumer reports,” as that term is defined in the United States Fair Credit Reporting Act, in their possession. I understand that the Cottonwood SWCD will use this information to determine my fitness/qualifications for the position I am seeking. This authorization expires one year from the date of my signature, below.

I hereby release the Cottonwood SWCD and all former employers, volunteer organizations and references listed herein and any and all agents acting on behalf of said Cottonwood SWCD, former employers, volunteer organizations or references, for any and all liability of whatever nature by reason of requesting or providing such information.

Date: \_\_\_\_\_ Signature \_\_\_\_\_