

**CITY OF STEWARTVILLE**  
**105 East First St., PO Box 275 Stewartville MN 55976**  
**Ph – (507)-533-4745 Fax – (507)-533-4746**

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We welcome you as an applicant for employment with the City of Stewartville, MN. Your application will be considered with others in competition for the position in which you are interested. It is the policy and intent of the City of Stewartville to provide equal opportunity employment to all persons. This policy prohibits discrimination because of race, color, sex, national origin, political affiliation, place of residence, marital status, sexual preference, status with regard to public assistance or disability, as is consistent with the City's policy of hiring a well-qualified person so as to maintain the high standards of public service required of all City employees. This policy applies to all phases of permanent and part-time employment by the City of Stewartville. Please furnish with us complete information as outlined in this application. You are encouraged to attach any additional information or materials, which you believe qualify you for the position for which you are applying.

**Part-time Snow Removal**

*Please make sure we can read your handwriting!*

**GENERAL INFORMATION**

<b>Last Name:</b>	<b>First Name:</b>	<b>MI</b>		
<b>Street Address:</b>	<b>City</b>	<b>State</b>	<b>Zip:</b>	<b>Phone No.</b>

**E-mail Address:** \_\_\_\_\_

Are you under 18 years of age?      Yes \_\_\_\_\_      No \_\_\_\_\_

Are you a United States Citizen OR, if not, do you have permission to work in this country?  
Yes \_\_\_ No\_\_\_

**Driver's License Information**

Driver's License No: \_\_\_\_\_

State of Issuance: \_\_\_\_\_ Class: \_\_\_\_\_ Expiration: \_\_\_\_\_

Have you had any moving violations in the last five (5) years?      Yes      No

If yes, please explain: \_\_\_\_\_

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**Employment History**

Present or Last Employer:			
Address:		City	State      Zip
Supervisor Title & Name		Phone # (    )	May we Contact? Yes    No
Dates of Employment	Hours Works/Week	Job Title	Last Salary or Hourly Wage
Reason for Leaving:			
Specific Duties:			

**Accommodations**

Do you have any physical or health limitations that would require special or reasonable accommodations by the City:    Yes \_\_\_\_\_      No \_\_\_\_\_

If yes, please describe the nature of the accommodation: \_\_\_\_\_  
 \_\_\_\_\_

**Employment of Relatives**

List any relatives currently employed by the City of Stewartville

Name	Relationship to You

**Personal References** (Not former employees or relatives)

Name & Occupation	E-mail Address	Phone Number

The Minnesota Government Data Practices Act requires that you be informed of the purposes and intended uses of the information you provided to the City of Stewartville during the application process or during employment. Any information about yourself that you provide will be used to identify you as an applicant and to assess your qualifications for employment with the City. If you wish to be considered for employment, you are required to provide the information requested in the Application for Employment. If you refuse to supply information requested by the City, it may mean your application will not be considered.

You are hereby advised that, under Minnesota law, the following information given by an applicant is considered to be public; veteran status, relevant test scores, rank on our eligible list; job history; education and training; work availability.

As an applicant, your name is considered private until you are certified as eligible for appointment to a position or when applicants are considered by the appointing authority to be finalists for a position with the City of Stewartville. "Finalist" means an individual who is selected to be interviewed by the appointing authority prior to selection.

The data concerning you, which is placed in your application folder or in your personnel file and which is not listed as public, is private. This private data will be shared with you and those members of the City staff who need it to process the application, update your personnel record, evaluate your work performance and if you are handicapped, provide the necessary accommodations.

It may be shared with the following: persons authorized to have access to the information under State or Federal law; persons authorized by Court Order to have access to the information; and persons to whom you consent in writing to have access to the information.

With the exception of racial and ethnic data, the data you give us about yourself is needed to identify you and to assist in determining your suitability for the position for which you are applying. Racial and ethnic data is used in summary form by the City's Affirmative Action Program to monitor protected class employment and to meet Federal, State and Local reporting requirements. Furnishing racial and ethnic data about yourself, as well as your social security number, is voluntary.

I certify that answers herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in the Application for Employment as may be necessary in arriving at an employment decision. I understand that this application is not, and is not intended, to be a contract for employment.

In the event of employment, I understand that false or misleading information given in my application, or interview(s), may result in discharge. I understand also, that I am required to abide by all rules and regulations of the City.

I certify that I have read the "Notice to Application" regarding the Minnesota Data Practice Act (MN Statutes 1301-1390), and I understand my rights as a subject of data.

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