



BENSON POLICE DEPARTMENT APPLICATION FOR EMPLOYMENT

The City of Benson is an equal opportunity employer and will not discriminate against any applicant or employee on any ground protected under federal, state or local law, including race, color, creed, religion, age, sex, national origin, ancestry, marital status, handicap, disability, membership or activity in any local commission, or status regarding public assistance, membership or non-membership in any labor organization, or any other characteristic protected under federal, state or local law. None of the questions in this application are intended to elicit information regarding any protected characteristics, nor imply any limitation, illegal preferences, or discrimination based upon non-job-related information or protected characteristics.

DATE _____

PERSONAL DATA	POSITION DESIRED: _____	
LAST NAME	FIRST NAME	MIDDLE NAME
PRESENT ADDRESS (Street, City, State, Zip)		WORK PHONE _____ HOME PHONE _____

DO YOU HAVE A VALID DRIVERS LICENSE? YES NO STATE ISSUED _____

DRIVERS LICENSE NUMBER _____ CLASS _____

DOB _____ SOCIAL SECURITY NUMBER _____

ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES AS A CITIZEN OR NATIONAL OF THE UNITED STATES; OR AN ALIEN LAWFULLY ADMITTED FOR PERMANENT RESIDENCE; OR AN ALIEN AUTHORIZED BY THE IMMIGRATION AND NATURALIZATION SERVICE TO WORK IN THE UNITED STATES? YES NO

ARE YOU CURRENTLY ELIGIBLE FOR A PEACE OFFICER LICENSE? YES NO

IF YES, WHEN DOES YOUR ELIGIBILITY LAPSE? _____ (ATTACH PROOF OF ELIGIBILITY)

ARE YOU CURRENTLY LICENSED AS A PEACE OFFICER? YES NO POST NUMBER _____

IF YES, ATTACH A COPY OF YOUR LICENSE AND CURRENT RENEWAL CARD.

ARE YOU CURRENTLY FIRST RESPONDER, EMT OR PARAMEDIC CERTIFIED? YES NO EMSRB LICENSE # _____

EMPLOYMENT HISTORY (START WITH YOUR PRESENT OR MOST RECENT POSITION)

COMPANY NAME _____	CITY & STATE _____	
SUPERVISOR _____	PHONE _____	
DATES OF EMPLOYMENT: FROM _____	TO _____	
SALARY: START _____	END _____	POSITION TITLE _____

BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES

REASON FOR LEAVING _____

EMPLOYMENT HISTORY CONTINUED

COMPANY NAME _____ CITY & STATE _____

SUPERVISOR _____ PHONE _____

DATES OF EMPLOYMENT: FROM _____ TO _____

SALARY: START _____ END _____ POSITION TITLE _____

BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES

REASON FOR LEAVING _____

COMPANY NAME _____ CITY & STATE _____

SUPERVISOR _____ PHONE _____

DATES OF EMPLOYMENT: FROM _____ TO _____

SALARY: START _____ END _____ POSITION TITLE _____

BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES

REASON FOR LEAVING _____

HAVE YOU EVER BEEN FIRED OR DISCIPLINED BY ANY PREVIOUS EMPLOYERS? YES NO

IF YES, PLEASE EXPLAIN: _____

EDUCATION

SCHOOL	NAME OF SCHOOL (LOCATION)	MAJOR AREA OF STUDY	NUMBER OF YEARS ATTENDED	DEGREE YES/NO
HIGH SCHOOL				
COLLEGE				
BUSINESS OR TRADE SCHOOL				
OTHER				

AVERAGE HIGH SCHOOL GRADES _____

COLLEGE GRADE POINT AVERAGE _____ BASED ON _____ POSSIBLE POINTS

CHARACTER REFERENCES (DO NOT LIST RELATIONS OR FORMER EMPLOYERS)

NAME	OCCUPATION	ADDRESS	PHONE
1. _____			
2. _____			
3. _____			

IMPORTANT, READ BEFORE SIGNING: I AUTHORIZE INVESTIGATION OF ALL STATEMENTS AND MATTERS CONTAINED IN THIS APPLICATION AND OTHER INFORMATION WHICH THE PROSPECTIVE EMPLOYER MAY DEEM RELEVANT TO MY EMPLOYMENT INCLUDING BUT NOT LIMITED TO, CONVICTION OF A JOB RELATED FELONY, MISDEMEANOR AND/OR MOVING TRAFFIC VIOLATIONS.

DATE _____ SIGNATURE OF APPLICANT _____

CITY OF BENSON TENNESSEN WARNING

In accordance with the Minnesota Government Data Practices Act, the City of Benson is required to inform you of your rights as they pertain to the private information collected from you. Private data is that information which is available to you, but not to the public. The personal information we collect about you is private.

Minnesota Statutes 13.01 to 13.87 on Government Data Practices require that you be informed that the following information which you are asked to provide on the application for employment is considered private data:

- | | |
|----------------------|---------------------------|
| 1) Name | 5) Social Security number |
| 2) Home address | 6) Conviction record |
| 3) Home phone number | 7) Disability type |
| 4) Date of birth | |

Your name, however, may become public upon consideration as a finalist for a job opening.

We ask this information for the following reasons: to distinguish you from all other applicants and identify you in our personnel files; to enable us to verify that you are the individual who makes the application; to enable us to contact you when additional information is required, send you notices and/or schedule you for interviews; to determine if you meet the minimum age requirements (if any); to conduct proper investigations if you are applying for a position; to determine whether or not your conviction record may be a job related equal opportunities and to meet affirmative action goals; to meet federal and state reporting requirements; and to make processing more efficient. The data supplied by you may be used for such other purposes as may be determined to be necessary in the administration of personnel in the City of Benson and the policies, rules, and regulations promulgated pursuant thereto.

FURNISHING SOCIAL SECURITY NUMBERS, DATE OF BIRTH (unless a minimum age is required), SEX, AGE GROUP, AND DISABILITY DATA IS VOLUNTARY, BUT REFUSAL TO SUPPLY OTHER REQUESTED INFORMATION WILL MEAN THAT YOUR APPLICATION FOR EMPLOYMENT MAY NOT BE CONSIDERED.

Private Data is available only to you and to other persons in the City Offices who have a bona fide need for the data. Public data is available to anyone requesting it and consists of all data furnished in the employment process which is not designated in this notice as private data.

Witness my signature that I fully understand the contents of this warning.

Date

Signature of Applicant

MILITARY

DRAFT CLASSIFICATION _____ VETERAN YES NO

DATES OF SERVICE: FROM _____ TO _____

RANK _____ DISCHARGE DATE _____ TYPE OF DISCHARGE _____

RESERVE STATUS _____ BRANCH OF SERVICE _____

DUTIES AND SPECIAL TRAINING

ATTACH A COPY OF FORM DD214

PLEASE NOTE OTHER FACTS OR SKILLS OF YOUR BACKGROUND WHICH WILL BE HELPFUL IN EVALUATING YOUR QUALIFICATIONS

ATTACH ADDITIONAL SHEET IF NECESSARY

CONVICTION

HAVE YOU EVER BEEN CONVICTED OR BEEN GIVEN A SUSPENDED SENTENCE, PLACED ON PROBATION, OR BEEN IMPRISONED BECAUSE OF ANY VIOLATION OF THE LAW? IF SO, FILL IN BELOW. DO NOT LIST PARKING VIOLATIONS OR JUVENILE OFFENCES. IF MORE SPACE IS NEEDED, USE A SEPARATE SHEET OF PAPER.

CHARGE	DATE	PLACE	PENALTY

ARE YOU CURRENTLY A CANDIDATE FOR ANY OTHER LAW ENFORCEMENT POSITIONS? YES NO

IF SO, WHERE? DEPARTMENT _____

ADDRESS _____

HAVE YOU BEEN BACKGROUNDED BY ANY OTHER LAW ENFORCEMENT AGENCY? YES NO

IF SO, WHERE? DEPARTMENT _____

ADDRESS _____

SIGNATURES

THIS STATEMENT MUST BE SIGNED. ANY FALSE STATEMENT ON THIS APPLICATION IS PUNISHABLE BY LAW.

I CERTIFY THAT ALL OF THE STATEMENTS BY ME IN THIS APPLICATION ARE TRUE, COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND ARE MADE IN GOOD FAITH. I UNDERSTAND THAT ANY FALSE INFORMATION ON THIS APPLICATION MAY BE CAUSE FOR REJECTION, OR DISMISSAL IF EMPLOYED.

SIGNATURE _____

DATE _____

**RETURN COMPLETED APPLICATIONS TO:
BENSON POLICE DEPARTMENT
1410 KANSAS AVENUE
BENSON, MN 56215**