# The City of International Falls Invites applications for position of CHIEF OF POLICE

This full-time position is an administrative position responsible for the maintenance of order, enforcement of law and ordinances, the prevention of crime, and the protection of life and property in the City of International Falls, and to direct and coordinate the activities of the Police Department. The full-time rate for this salary position in 2021 is \$ 73,956 to \$92,445 depending on qualifications. Minimum qualifications require a High School Diploma or GED; Shall have a valid MN Driver's license; Shall possess a Minnesota Police Officer's License or obtain licensure prior to appointment; Shall have a minimum of ten (10) years of police service in the International Falls Police Department or a comparable size community within the State of Minnesota; Shall successfully pass examinations as determined by the hiring committee; Ability to perform all physical aspects of the position, including successfully passing any physical and/or psychological examinations, as determined; and satisfactorily complete a background investigation.

All International Police Falls Officers meeting these requirements and passing the required examinations will be allowed one quarter (1/4) point credit for each year of service with the department. Veteran's preference will be allowed, pursuant to the law.

Interviews will take place the week of May 24th, 2021.

APPLICATION PACKETS <u>WILL</u> BE AVAILABLE FOR DISTRIBUTION AND COLLECTION FROM CITY OFFICES. Additional information is available from Betty Bergstrom, Interim City Administrator, at (218) 283-7984.

## CONTACT FOR APPLICATION PACKET INFORMATION:

City of International Falls
600 4th Street
International Falls, MN 56649
Phone (218) 283-9484
Office Hours: Monday - Thursday, 7:00 A.M. to 5:00 P.M.

Friday, 7:00 A.M. to Noon

APPLICATION DEADLINE: Friday, May 14, 2021 at 12:00 P.M. (Noon)

Advertise Dates: Thursday, April 22, 2021 The Journal

Thursday, April 29, 2021 The Journal

# CITY OF INTERNATIONAL FALLS

POSITION: CHIEF OF POLICE

**POSITION DESCRIPTION:** To oversee the maintenance of order, enforcement of law and

ordinances, the prevention of crime, and the protection of life and property in the City of International Falls, and to direct and

coordinate the activities of the Police Department.

**HOURS & WAGES:** As per Salaried Employees Benefit Policy. For 2021, the salary

range is \$73,956 to \$92,445 depending upon qualifications.

**STATUS:** Full-time, exempt.

**SUPERVISION:** Supervisor: The City Administrator is the immediate supervisor.

**Supervision Exercised:** The Chief of Police shall supervise and oversee the work of the full-time and part-time workers assigned to

the Police Department.

**ESSENTIAL FUNCTIONS:** To perform this job successfully, an individual must be able to perform each essential function satisfactorily.

1. Plans, organizes, directs and reviews all operations of the Police Department; continually evaluates the functioning of the department, making recommendations and initiating changes as needed; sets policy for all law enforcement activities; reviews and maintains departmental records and reports; prepares periodic and special reports on departmental activities and operations; prepares the annual budget recommendation for the department; evaluates and administers the annual budget; maintains inventory of all departmental equipment.

- 2. Works with community members and groups to identify public safety issues, problems and concerns and to resolve the issues, problems and concerns using sound problem resolution skills and processes.
- 3. Reviews all Police Department activities; assures that all laws are fairly, consistently, and impartially enforced; investigates all injury to Police personnel; investigates all substantial damage to departmental equipment and buildings; receives and responds to citizen complaints regarding public safety issues.
- 4. Represents the Police Department to others; coordinates public safety and law enforcement activities with other City departments; serves as liaison to other law enforcement departments, criminal justice departments, courts, county departments, and state agencies; serves as liaison to various public/private groups and businesses; release information to the news media and public; attends meetings of the City Council, Boards and Committees as requested; studies issues, making recommendations to the City Administrator or City Council regarding public safety concerns, problems and complaints.
- 5. Supervises all departmental personnel; assists with recruitment, promotion, discipline, and dismissal of personnel; assigns responsibilities and duties to departmental personnel as needed; provides leadership for all personnel; maintains communication with all personnel; receives, investigates and resolves citizen

- complaints regarding personnel; processes or resolves grievances in accordance with established policies.
- 6. Plans and conducts meetings and public speaking events; plans, develops and delivers presentations to various audiences on various subjects including presentations to the City Council.
- 7. Surveys streets, highways, public lighting and public safety concerns and develops plans, including the placement of traffic control devices and makes recommendations with the Director of Public Works for Council consideration.
- 8. Serves as incident commander at all major events where there is a threat to life and/or property.
- 9. Works cooperatively with other law enforcement agencies focusing on safety for the community.
- 10. Shall perform effective verbal, electronic, and written communication skills with attention to detail and follow-up.
- 11. Shall participate in all required staff training programs to implement policies, maintain proper procedures, and ensure City standards and safeguards are observed.
- 12. Shall be able to respond to emergencies including after work hours, as needed.
- 13. Shall perform duties as described within the job description and all other duties as directed by his/her supervisor to ensure lawful compliance with all applicable laws, rules, and procedures and promote thorough, effective, and efficient police department operations.

# KNOWLEDGE, SKILLS AND ABILITIES:

The requirements listed below are representative of the knowledge, skill and/or ability required.

- 1. Knowledge of all applicable State Statutes, investigative procedures and techniques, court decisions and other legal guidelines and current law enforcement practices and techniques.
- 2. Ability to manage departmental operations and coordinate the work of all personnel.
- 3. Ability to delegate responsibility.
- 4. Ability to secure the respect and confidence of departmental personnel and the public.
- 5. Ability to cooperate with a wide range of individuals and organizations.
- 6. Ability to be tactful, diplomatic, maintain confidentiality, and lead.
- 7. Ability to effectively communicate with difficult/emotional/distraught individuals.
- 8. Ability to resolve conflict.
- 9. Flexibility and ability to work under changing priorities.
- 10. Considerable skill in the safe operation of motor vehicles and equipment.
- 11. Knowledge of the work hazards and applicable safety precautions associated with the area of work assigned to comply with City and OSHA standards.
- 12. Ability to read and interpret documents such as safety rules, operating and maintenance instructions, procedure manuals, and policies.

- 13. Ability to work independently.
- 14. Ability to establish and maintain effective, team-focused, collaborative working relationships with co-workers and the public and communicate effectively.
- 15. Working ability to listen and speak effectively and follow oral and written instructions.

# MINIMUM QUALIFICATIONS:

- 1. Shall have a High School diploma or GED.
- 2. Shall possess a valid Minnesota driver's license Class D and good driving history.
- 3. Shall possess a Minnesota Police Officer's License or obtain licensure prior to appointment.
- 4. Shall have a minimum of ten (10) years of police service in the International Falls Police Department or a comparable size community within the State of Minnesota.
- 5. Shall successfully pass examinations as determined by the hiring committee.
- 6. Ability to perform all physical aspects of the position, including successfully passing any physical and/or psychological examinations, as determined.
- 7. The candidate must satisfactorily complete a criminal background, credit and reference check process at City discretion.

# **DESIRED QUALIFICATIONS:**

- 1. Experience as a supervisor in a Police Department.
- 2. Demonstrated experience in the field of Police Administration and community outreach programing.

# WORK ENVIRONMENT/PHYSICAL REQUIREMENTS:

- 1. Ability to sit and/or stand for long periods of time.
- 2. Ability to speak and listen for extended periods of time.
- 3. Ability to speak and listen for extended periods to convey detailed and important instructions to others accurately.
- 4. Specific vision capabilities to include close vision and distance vision, depth perception, color perception, night vision, and the ability to adjust focus.
- 5. Work regularly requires use of hands to finger, handle or feel; stooping, kneeling, crouching or crawling; reaching with hands and arms; pushing or pulling and lifting; climbing and balancing; repetitive motions; and occasionally tasting or smelling.
- 6. Ability to occasionally lift and/or move up to 100 pounds.
- 7. The work regularly requires travel and exposure to outdoor weather conditions with frequent exposure to wet, humid conditions (non-weather related).
- 8. Capability to perform the essential functions of the position, with or without accommodation.



# City of International Falls Application For Employment

We welcome you as an applicant for employment. Your application will be considered with others for the position advertised. Qualified applicants are considered without regard to age, color, creed, disability, familial status, marital status, national origin, political affiliation, public assistance status, race, religion, sex, or sexual or affectional orientation. Failure to complete this application in its entirety will result in rejection of your application.

| Position You Are Applying For CHIEF OF POLICE |          | Available Start Date |                      | Desired Pay |
|---|----------|----------------------|----------------------|-------------|
| Employment Desired                            |          | ☐ Part Time          | ☐ Seasonal/Temporar  | у           |
|   |          |                      |                      |             |
| Personal Info                                 | ormation |                      |                      |             |
| Personal Info                                 | ormation |                      |                      |             |
| Name  | City     |                      | State                | Zip         |
|   |          | nber                 | State  Email Address | Zip         |

Employment History
(List either your last 4 employers and/or employment within the last 10 years. Start with present or most recent employer.)

| Rate     | Ending Pay Rate  Zip                                 |
|----------|--|
| T        |  |
| State    | Zip  |
| <u> </u> |  |
|          |  |
|          | Dates Employed                                       |
| Rate     | Ending Pay Rate                                      |
| State    | Zip  |
| <u> </u> |  |
|          | Dates Employed                                       |
| Rate     | Ending Pay Rate                                      |
| State    | Zip  |
| •        | l  |
|          | Dates Employed                                       |
| Rate     | Ending Pay Rate                                      |
| State    | Zip  |
|          |  |
|          | Dates Employed                                       |
| Rate     | Ending Pay Rate                                      |
| State    | Zip  |
| 1        | <u> </u>   |
|          | Dates Employed                                       |
| Rate     | Ending Pay Rate                                      |
| State    | Zip  |
|          | y Rate  State  Y Rate  State  Y Rate  Y Rate  Y Rate |

| Education                                      |                  |                      |                 |       |  |
|--|------------------|----------------------|-----------------|-------|--|
| School Name                                    | Location         | Years Attended       | Degree Received | Major |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
| Military Complete this section if              | you served in th | ne U.S. Armed Forces | i.              |       |  |
| Branch of Service:                             |                  | Rank at Discharge:   |                 |       |  |
| Describe your duties and any sp                | ecial training   |                      |                 |       |  |
| Describe your duties and any sp                | eciai traiiiiig. |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
| Other Certification List other certifications, |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
| References                                     |                  |                      |                 |       |  |
| Name   |                  | Title                | Company         | Phone |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |
|  |                  |                      |                 |       |  |

# SUPPLEMENTAL APPLICATION FORM

City of International Falls Police Department

# CHIEF OF POLICE

| Applicant Name (please type or print full name)  | D                              | Date                         |  |
|--|--------------------------------|------------------------------|--|
|  |                                |                              |  |
| MINIMUM REQUIREMENTS (check Yes or No as applicable)   |                                |                              |  |
| 1. Do you have a High School Diploma or GED?   | Yes                            | No                           |  |
| 2. Do you have a valid MN Driver's license?  | Yes                            | No                           |  |
| 3. Do you have a valid Minnesota (MN) Police Officer's license? If no, I shall obtain a valid Minnesota (MN) Police Office                                       | er's license prior to ap       | •                            |  |
|  | Yes                            | No                           |  |
| 4. Do you have at least ten (10) years police service in the Inter comparable size community within the State of Minnesota?                                      | national Falls Police D<br>Yes | Department (IFPD) or a<br>No |  |
| 5. Have you reviewed both the written and physical job descript you fulfill the requirements of both?  | ion, and to the best o<br>Yes  | f your knowledge can<br>No   |  |
| I certify that all answers to the above questions are true and I understand tha<br>from this Supplemental Application Form shall be cause for rejection of my ap |                                |                              |  |
| Applicant signature  | Date                           |                              |  |

# **Information Regarding Claiming Veterans' Preference**

Preference points are awarded to qualified veterans as defined by Minn. Stat. § 197.477, and to certain spouses of deceased or disabled veterans subject to the provision of Minn. Stat. §§ 197.447 and 197.455.

#### The veteran must:

- a) be a U.S. citizen or resident alien;
- b) have received a discharge under honorable conditions from any branch of the U.S. Armed Forces; AND have either:
  - i. served on active duty for at least 181 consecutive days, or
  - ii. have been discharged by reason of service connected disability, or
  - iii. have completed the minimum active duty requirement of federal law, as defined by CFR title 38, section 3.12a, i.e., having fulfilled the full period for which a person was called or ordered to active duty by the United States President, or
  - iv. certified service and verification of "veteran status" granted under U.S. PL 95-202.

The information provided will be used to determine your eligibility for veterans' preference points. You are required to supply the following information:

- 1) Attach a copy of the "Member Copy 4" of your DD214 or DD215, or other documentation verifying service. This copy must state the nature of discharge; i.e., honorable, general, medical, under honorable conditions.
- Disabled veterans must also supply a Military/United States Department of Veterans' Affairs Rating Decision that supports/verifies the fact that the injury was incurred while on, or as a result of, active duty service. Disability incurred while on, or as a result of, active duty for training purposes does not quality for disabled veteran preference per Minn. Stat. §§ 197.447 and 197.455.
- A spouse of a deceased veteran, applying for preference points must supply their marriage certificate, the veteran's "Member Copy 4" DD214 or DD215, or other documentation verifying service, USDVA verification that veteran died on or as a result of active duty, a death certificate, verification of their marriage at the time of veteran's death, and that the spouse has not remarried.

Thank you for your military service and for your interest in employment with the City of International Falls. Please contact our office at 218-283-9484 or your local County Veterans' Service Office at 218-283-1179, if you have any questions regarding veterans' preference.

# **Veterans' Preference**

### COMPLETE THIS FORM ONLY IF YOU ARE CLAIMING VETERANS' PREFERENCE

NOTE: VETERANS' PREFERENCE POINTS CANNOT BE CONSIDERED WITHOUT SUPPORTING DOCUMENTATION. ATTACH COPY OF "MEMBER COPY 4" VETERAN'S DD214, OR OTHER DOCUMENTATION VERIFYING SERVICE.

# DOCUMENTATION MUST BE RECEIVED BY THE APPLICATION DEADLINE OF THE POSTING IN ORDER TO BE CONSIDERED. (VETERAN IS DEFINED BY MINN. STAT. § 197.447)

You must submit a PHOTOCOPY of your "Member Copy 4" of your DD214 or other documentation verifying service to substantiate the services information requested on the form. Claims not accompanied by proper documentation will not be processed. For assistance in obtaining a copy of your "Member Copy 4" of your DD214, or other documentation verifying service, contact your County Veterans' Service Office.

The City of International Falls operates under a point preference system, which awards points to qualified veterans to supplement their application. Ten (10) points are granted to non-disabled veterans on open competitive examinations; Fifteen (15) points are awarded if the veteran has a service connected compensable disability as certified by the U.S. Department of Veterans Affairs (USDVA).

To qualify for preference for a **competitive exam**, you must have earned a passing score and been separated under honorable conditions from any branch of the armed forces of the United States after having served on active duty for 181 consecutive days, **or** by reason of disability incurred while serving on active duty, **or** after having served the full period called **or** ordered for federal, active duty **and** be a United States citizen or resident alien.

Signature

Veteran's preference may be used by the surviving spouse of a deceased veteran, who died on active duty or as a result of active duty, and by the spouse of a disabled veteran who is unable to qualify because of the disability.

To qualify for preference on a **promotional exam**, a veteran must have earned a passing exam score and received a USDVA active duty service connected disability rating of 50% or more. For a promotional exam, a qualified disabled veteran is entitled to be granted five (5) points. Disabled veterans eligible for such preference may use the five points preference only for the first promotion after securing employment with the City of International Falls.

Claims must be made on the form below and submitted with your application by the application deadline of the position for which you are applying. If the "Member Copy 4" DD214, or other documentation verifying service, is submitted to our office separate from this sheet, please attach a note with it indicating the position for which you are applying and your present address.

| Name (Last)  | (First)              | (MI)   | Position For Which You Applied:                 |                         |                             |
|--|----------------------|--|---|-------------------------|-----------------------------|
|  |                      |  | Closing Date:                                   |                         |                             |
| Address (Street)   | (City) (St           | ate) (Zip)   | Phone Number                                    | Are you a US C          | itizen or Resident Alien?   |
|  |                      |  |   | YES                     | □ NO                        |
| VETERAN (10 points):  ("Member Copy 4" of DD214 or DD215, or other documentation verifying service, must be submitted to receive points)  Honorably discharged veteran   |                      |  |   |                         |                             |
| receive points)  Percent of  | DD214, or other doc  | umentation verifying service, and U<br>6<br>vithin the City of International Falls   | SDVA letter of disability rating de employment? | ecision of 10% o<br>Yes | r more must be submitted to |
| ("Member Copy 4" of<br>veteran died on or as<br>from the veteran).   | DD214 or DD215, or   | es or 15 if the veteran was disabled<br>other documentation verifying serv<br>y must be submitted to receive poir<br>Have you remarried? | rice, photocopy of marriage certif              |                         |                             |
| SPOUSE OF DISABLED VETERAN (15 points):  ("Member Copy 4" of DD214 or DD215, or other documentation verifying service, and USDVA letter of disability rating decision of 10% or more must be submitted to receive points).  How does Veteran's disability prevent performance of a stated job "requirement?" Due to the veteran's service-connected disability the veteran is unable to qualify for this position because (be specific): |                      |  |   |                         |                             |
| correct to the best of   | of my knowledge. I l | eference points for this examinat<br>nereby acknowledge that I am rea<br>y of International Falls by the req                             | sponsible to obtain the require                 | •                       | •                           |

Date

# **EMPLOYMENT CERTIFICATION**

# READ THE FOLLOWING WAIVER CAREFULLY BEFORE SIGNING THIS APPLICATION

- 1. I have read and understand the job description and this application for the position for which I am applying.
- 2. I certify that all the information I have provided on this application is true and complete to the best of my knowledge. I understand that giving false information or omitting requested information may result in rejection of my application or dismissal if I am hired.
- 3. <u>I, hereby, authorize</u> the City of International Falls to verify this information to determine whether or not I am qualified for the position for which I am applying.
- 4. <u>I, hereby, authorize</u> all current and previous employers to release job related information upon the request of the City of International Falls.
- 5. <u>I, hereby, authorize</u> the City of International Falls to conduct a Criminal History Record Information check and have access to such records for purposes of determining my eligibility for employment with the City.
- 6. I understand that it is my responsibility to notify the City of International Falls, in writing, of any changes to information reported on this application.
- 7. I understand that this position requires pre-employment physical examinations and drug/alcohol tests. I consent to take the pre-employment physical examinations and drug/alcohol tests as may be required by the City of International Falls at such times and places as the City may designate. The City pays for the costs of the examinations and tests.
- 8. As part of this application, I, the undersigned applicant, do hereby, expressly and voluntarily release, relinquish, and forever discharge the City of International Falls, it's agents, officers, or employees, from any and all claims, demands or causes of action, including specifically, all acts of active or passive negligence on the part of the City, it's agents, officers, or employees, it being fully understood that I do, hereby, voluntarily assume all risks of whatever nature in connection herewith.

| APPLICANT SIGNATURE         | DATE    |
|-----------------------------|---------|
|                             |         |
| CITY OF INTERNATIONAL FALLS |         |
| CITY OF INTERNATIONAL FALLS |         |
|                             | <u></u> |
|                             | TITLE   |

# **City of International Falls**

# EQUAL EMPLOYMENT OPPORTUNITY AFFIRMATIVE ACTION POLICY

Attention applicant:

Keep your copy of this policy, which is attached at the back of this application packet.

This is to affirm the City of International Falls' policy of providing Equal Opportunity to all employees and applicants for employment in accordance with all applicable Equal Employment Opportunity/ Affirmative Action laws, directives and regulations of Federal, State, and Local governing bodies or agencies thereof, especially Minnesota Statutes 363.

The City of International Falls will not discriminate against or harass any employee or applicant for employment because of age, color, creed, disability, familial status, marital status, national origin, political affiliation, public assistance status, race, religion, sex, or sexual or affectional orientation.

The City of International Falls will take Affirmative Action to ensure that all employment practices are free of such discrimination. Such employment practices include, but are not limited to, the following: hiring, upgrading, demotion, transfer, recruitment or recruitment advertising, selection, layoff, disciplinary action, termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship.

The City of International Falls will commit the time and resources reasonably necessary, both financial and human, to achieve the goals of Equal Opportunity and Affirmative Action.

The City of International Falls will evaluate the performance of its management and supervisory personnel on the basis of their involvement in achieving these Affirmative Action objectives as well as other established criteria. Any employee of this City who does not comply with the Equal Employment Opportunity policies and procedures as set forth in this statement and plan may be subject to disciplinary action.

No part of this program is to be construed as a contract between the City of International Falls and any individual employee. It does not describe in any way the terms and conditions of employment of City employees. Such terms and conditions are set forth in, and the employment relationship is governed by, applicable collective bargaining agreements, employment agreements, or the personnel code of the City.

The City of International Falls has appointed the City Administrator to manage the Equal Employment Opportunity/Affirmative Action program. The City Administrator's responsibilities will include monitoring all Equal Employment Opportunity activities and reporting the effectiveness of this Affirmative Action program, as required by Federal, State, and Local agencies. If any employee or applicant for employment believes he/she has been discriminated against, please notify the City Administrator, 600 4<sup>th</sup> Street, International Falls, MN 56649, or call (218) 283-9484.

# **City of International Falls**

# **EMPLOYMENT VERIFICATION INFORMATION**

Attention applicant:

Keep your copy of this information sheet, which is attached at the back of this application packet.

The U.S. Government requires all employers to verify new employees' eligibility for U.S. employment and their identity. The City of International Falls must decline to hire prospective employees if they fail to present adequate proof of their eligibility and identity.

As evidence of eligibility and identity, the government requires new employees to submit originals of one document from Group A or one document from each of Groups B and C.

IF YOU ARE HIRED BY THE CITY OF INTERNATIONAL FALLS, YOU MUST SUBMIT THE REQUIRED DOCUMENT(S) BEFORE YOU CAN BEGIN EMPLOYMENT. PLEASE BE PREPARED TO PROVIDE THESE DOCUMENTS WHEN REQUESTED BY THE CITY.

#### **GROUP A**

- United States passport
- Certificate of United States Citizenship
- Certificate of Naturalization
- Unexpired foreign passport with attached unexpired Employment Authorization
- Alien Registration Card with photograph

### **GROUP B**

- A state issued driver's license or I.D. card with photograph, or information including name, sex, date of birth, height, weight, and color of eyes.
- Military Identification Card
- Other photo identification approved by the Attorney General

### **GROUP C**

- Original Social Security Number Card (other than a card stating it is not valid for employment)
- A U.S. birth certificate issued by the state, county, or municipal authority bearing a seal or other certification
- Unexpired INS Employment Authorization

# IMPORTANT FACTS ABOUT INFORMATION ON YOUR APPLICATION

This application is to assist in the process of referring you for possible employment. Certain information requested on the application is private; that is, it may be released only to you or to the agencies where you may be considered for employment (to comply with M. S. 13.43, Subd. 2). If you become employed by the City, the data will be available to the Department of Finance, the Internal Revenue Service, and the Social Security Administration for payroll and tax purposes. If you disagree with the data we have about you, notify the Director of Personnel by letter.

Why We Ask For It

Private Data

Are You Legally Obliged

To Provide it?

What May Happen If

You Don't Provide It?

|  | VVIII VVE ASK FOI IL   | TO FIGNICE IC:             | Tou Doil ( Provide it:   |
|--|--|----------------------------|--|
| Social Security Number   | To distinguish you from all other applicants   | No                         | In most cases, nothing. However, it will help to ensure that your records are accurate.  |
| Name   | To distinguish you from all other applicants.  | Yes                        | Failure to provide information may be cause for rejecting an application.  |
| Date of Birth (when requested on a separate form)  | To conduct a check of criminal records for certain positions.  | No                         | Failure to provide information may be cause for rejecting an application   |
| Address  | To be able to send you notices.  | Yes                        | Failure to provide information may be cause for rejecting an application.  |
| Home Telephone   | To be able to contact you to determine availability for interview and to notify you when we need you to work on short notice.  | No                         | We may not be able to employ you in certain jobs where you may be required to come to work on short notice.  |
| Sex, Racial/Ethnic Group,<br>Handicapped Status, Veterans<br>Status (This information is<br>requested on a separate form)          | To be able to make Equal Opportunity reports as required by law.   | No                         | We will not be able to determine whether our selection processes result in unfair discrimination, or to take affirmative action in our hiring.               |
| Conviction Record  | To determine whether we may legally accept an application from you and to determine whether you records may be a job-related consideration.  | Yes                        | We will not be able to make determinations required by law.  Failure to provide relevant conviction information may be grounds for dismissal.                |
| requested on a separate form)  Conviction Record  The City has the right to verify information and by me in an interview which may | application from you and to determine whether  | f there are any misreprese | in our hiring.  We will not be able to make determination required by law.  Failure to provide relevant conviction information may be grounds for dismissal. |
| elated information contained in this   | employment, I authorize the City of International Fall<br>application, including, but not limited to, my rec<br>over, I hereby release the City of International Falls ar<br>ormation from any person. | ords maintained by an e    | educational institution relating to academic   |
| YES YES, but not presen  | nt employer until job is offered.  | may be unable to hire y    | ou without this information)   |
| declare that any statement in this a the information below.  | application or information provided is true and co   | omplete and hereby ack     | nowledge that I have read and understand   |
| DATE   | APPLICANT'S SIGNATURE  |                            |  |

# IMPORTANT FACTS FOR YOU TO KNOW CONCERNING YOUR APPLICATION

Minnesota law requires that you be informed of the purposes and intended uses of the information you provide to the City of International Falls during the application process or during employment.

Any information about yourself that you provide to the City of International Falls during the application process will be used to identify you as an applicant; to distinguish you from all other applicants; to enable us to contact you when additional information is required, send you notices and/or schedule you for interviews; to determine whether or not your conviction record may be a job-related consideration affecting you suitability for the position you applied for; 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 that your application will not be considered.

You are hereby advised that, under Minnesota law, the following information about you must be made available to any member of the public who requests it:

veteran status rank on eligibility list education and training relevant test scores job history work availability

Your name will not be made available to the public unless you are selected to be interviewed by the City.

Other information about yourself that you provide during the application process or during employment with the City is classified as private under state law, except as listed as public here or as listed in Minn. Stat. Ch. 13.01, et seq. That is, the information may not be provided to members of the public except:

- (1) persons authorized to have access to the information under state or federal law; and
- (2) persons authorized by court order to have access to the information; and
- (3) persons to whom you consent in writing to have access to the information.
- (4) All individuals in the City who need to know information will have access.

Materials submitted in support of an application are normally not returned. You should not submit an original document if it is your only copy.

I authorize investigation of all statements contained in this application for employment as may be necessary to arrive at an employment decision. I certify that all answers to the above questions are true and understand that any false information on or omission of information from this application will be cause for rejection of this application or termination of employment without notice or benefits.

| APPLICANT'S SIGNATURE: |  |
|------------------------|--|
|                        |  |
| DATE:                  |  |

# **City of International Falls**

# **EMPLOYMENT VERIFICATION INFORMATION**

# Attention applicant: Tear off and retain for your records

The U.S. Government requires all employers to verify new employees' eligibility for U.S. employment and their identity. The City of International Falls must decline to hire prospective employees if they fail to present adequate proof of their eligibility and identity.

As evidence of eligibility and identity, the government requires new employees to submit originals of one document from Group A or one document from each of Groups B and C.

IF YOU ARE HIRED BY THE CITY OF INTERNATIONAL FALLS, YOU MUST SUBMIT THE REQUIRED DOCUMENT(S) BEFORE YOU CAN BEGIN EMPLOYMENT. PLEASE BE PREPARED TO PROVIDE THESE DOCUMENTS WHEN REQUESTED BY THE CITY.

#### **GROUP A**

- United States passport
- Certificate of United States Citizenship
- Certificate of Naturalization
- Unexpired foreign passport with attached unexpired Employment Authorization
- Alien Registration Card with photograph

### **GROUP B**

- A state issued driver's license or I.D. card with photograph, or information including name, sex, date of birth, height, weight, and color of eyes.
- Military Identification Card
- Other photo identification approved by the Attorney General

### **GROUP C**

- Original Social Security Number Card (other than a card stating it is not valid for employment)
- A U.S. birth certificate issued by the state, county, or municipal authority bearing a seal or other certification
- Unexpired INS Employment Authorization

# EQUAL EMPLOYMENT OPPORTUNITY AFFIRMATIVE ACTION POLICY

# Attention applicant: Tear off and retain for your records

This is to affirm the City of International Falls' policy of providing Equal Opportunity to all employees and applicants for employment in accordance with all applicable Equal Employment Opportunity/ Affirmative Action laws, directives and regulations of Federal, State, and Local governing bodies or agencies thereof, especially Minnesota Statutes 363.

The City of International Falls will not discriminate against or harass any employee or applicant for employment because of age, color, creed, disability, familial status, marital status, national origin, political affiliation, public assistance status, race, religion, sex, or sexual or affectional orientation.

The City of International Falls will take Affirmative Action to ensure that all employment practices are free of such discrimination. Such employment practices include, but are not limited to, the following: hiring, upgrading, demotion, transfer, recruitment or recruitment advertising, selection, layoff, disciplinary action, termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship.

The City of International Falls will commit the time and resources reasonably necessary, both financial and human, to achieve the goals of Equal Opportunity and Affirmative Action.

The City of International Falls will evaluate the performance of its management and supervisory personnel on the basis of their involvement in achieving these Affirmative Action objectives as well as other established criteria. Any employee of this City who does not comply with the Equal Employment Opportunity policies and procedures as set forth in this statement and plan may be subject to disciplinary action.

No part of this program is to be construed as a contract between the City of International Falls and any individual employee. It does not describe in any way the terms and conditions of employment of City employees. Such terms and conditions are set forth in, and the employment relationship is governed by, applicable collective bargaining agreements, employment agreements, or the personnel code of the City.

The City of International Falls has appointed the City Administrator to manage the Equal Employment Opportunity/Affirmative Action program. The City Administrator's responsibilities will include monitoring all Equal Employment Opportunity activities and reporting the effectiveness of this Affirmative Action program, as required by Federal, State, and Local agencies. If any employee or applicant for employment believes he/she has been discriminated against, please notify the City Administrator, 600 4<sup>th</sup> Street, International Falls, MN 56649, or call (218) 283-9484.