STEVENS SOIL & WATER CONSERVATION DISTRICT APPLICATION FOR PERSONNEL POSITIONS

I. EQUAL EMPLOYMENT OPPORTUNITY

It is the policy of Stevens Soil and Water Conservation District to provide equal employment opportunity for all, without discrimination on the basis of race, color, creed, religion, national origin, sex, and marital status, status with regard to public assistance, disability, sexual orientation, or age.

II. PRIVACY NOTICE

The information requested on this application is intended to be used by Stevens SWCD in determining suitability for employment for the position, which you are seeking. You are not legally required to provide any of the information requested in this form or as part of the application process at this time. However, failure to provide complete, accurate information may result in Stevens SWCD being unable to offer employment to you. With respect to any special accommodations necessary for completing your application or the interviewing process, Stevens SWCD may be unable to provide the necessary accommodations if you do not provide the information in Section IV. The information on this application which is classified as private data under the Minnesota Government Data Practices Act will not be released outside Stevens SWCD without your consent except as necessary for tax purposes or as required by state or federal law.

III. POSITION DESIRED Title of position for which you are applying: _____ Date available to begin employment: IV. PERSONAL DATA Phone: Email: Are you either a U.S. citizen or legally eligible to hold employment in the United States? Yes: No: Have you previously worked for the District? Yes: No: If yes, position held: Do you have any special needs which may necessitate accommodations in the application/interview process? Yes: No: If yes, please describe the type of accommodations requested: List all other names under which you have been employed or under which your employment or educational records may be found: V. WORK/VOLUNTEER EXPERIENCE List all work and volunteer experience, most recent to be listed first. Employer Name: Employer Address: Iob Title: lob Duties:_____

Dates of Employment/Experience:_______Reason for Leaving:_____

| Job Title: | | |
|------------------------------|------------------------|--|
| Job Duties: | | |
| Dates of Employment/Exp | erience: | Reason for Leaving: |
| Employer Name: | | |
| Employer Address: | | |
| Job Title: | | |
| Job Duties: | | |
| Dates of Employment/Exp | erience: | Reason for Leaving: |
| Employer Name: | | |
| Employer Address: | | |
| Job Title: | | |
| Job Duties: | | |
| Dates of Employment/Exp | erience: | Reason for Leaving: |
| Employer Name: | | |
| Employer Address: | | |
| Job Title: | | |
| Job Duties: | | |
| | | Reason for Leaving: |
| VI. LICENSURE | | |
| VI. LICENSONE | | |
| List current licenses regis | trations or certifica | tes relevant to the position for which you are applying. |
| License/no. | _ | Date Expiration |
| | | • |
| | | |
| | | g, must receive all applicable licenses or certifications. If hired, you |
| remain responsible for ens | suring that all applic | cable licenses remain in effect. |
| VII. EDUCATION | | |
| Include high achool and /o | r institution issuing | GED and any additional education/courses taken. |
| Do not list dates of attenda | | |
| Do not list dates of attenda | ance for might school. | List most recent mist. |
| Name of School: | | |
| | | |
| Degree/Dinloma Received | - • | |
| Major/Minor: | •• | Dates of Attendance: |
| | | Dutes of fitterial and in |
| Name of School: | | |
| Address of School | | |
| Degree/Diploma Received | : | |
| Major/Minor: | | Dates of Attendance: |
| Name of Cabe -1 | | |
| Name of School: | | |
| Address of School | <u> </u> | |
| Degree/Diploma Received | . <u> </u> | Data of Attandance |
| major/minor: | | _ Dates of Attendance: |

| List/describe any other training and/or experience relevant to the position for which you are applying: |
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| VIII. REFERENCES |
| These should be people 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 District reserves the right to contact all prior employers, educational institutions or institutions where you have volunteered in addition to references listed below. |
| Name of Reference: |
| Address: |
| Phone Number: Title: |
| Name of Reference: |
| Address: |
| Phone Number: Title: |
| Name of Reference: |
| Address: |
| Phone Number: Title: |
| IX. VETERAN STATUS |
| Are you an honorably discharged veteran of the armed forces of the United States or are you otherwise eligible to claim Veterans Preference Points? Yes: No: No: No: No: If you are a disabled veteran and wish to claim additional points, please check here: |
| X. PRIOR EMPLOYMENT |
| Have you ever been discharged or forced to resign from prior employment? Yes: No: No: Have you ever been discharged or forced to resign from prior employment? |
| XI. PERSONAL STATEMENT |
| Please indicate why you are interested in the position and what you hope to accomplish if selected. |
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| XII. UNEXCUSED ABSENCES FROM WORK |
| How many days were you inexcusably absent from work during the preceding three (3) years other than absence due to illness or injury of you or your immediate family? |
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XIII. CRIMINAL BACKGROUND

Stevens SWCD will request information regarding criminal history in the event that you become a finalist for the position for which you are applying. For certain positions, criminal background information will be requested during the application stage. Further, Stevens SWCD may conduct a criminal background check on individuals upon making a contingent job offer. Please refer to the job description for this position to determine if such a check will

be conducted. If the job description states a criminal check will be conducted, no offer of employment shall become final until receipt of the results of the criminal background check from the BCA or other agency, the content of which is acceptable to Stevens SWCD, and formal approval by the appointing authority.

XIV. CERTIFICATION, ACKNOWLEDGMENT AND RELEASE

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 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 District.

I understand and acknowledge and agree that no offer of employment is valid or binding until formal approval by the District Board or the appointing authority referenced in the job description and that until such approval that the District 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 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 District and its agents 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 District 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 District and all former employers, volunteer organizations and references listed herein and any and all agents acting on behalf of said District, former employers, volunteer organizations or references, for any and all liability of whatever nature by reason of requesting or providing such information.

| Date | Signature |
|------|-----------|
| | 8 |

Typed name on signature line of electronically submitted form serves as signature.