

City of Hastings

Application for Hastings Police Volunteer Program

Please return The City of Hastings Police Department, 101 4th Street East, Hastings, MN 55033
completed form to: Ph: 651-480-2300 F: 651-437-1206 hpd@ci.hastings.mn.us www.ci.hastings.mn.us

For office use only:
Date Received _____
App. # _____

The City of Hastings, and the Hastings Police Department, are an Affirmative Action/Equal Opportunity Employer. It is our policy to provide equal opportunity in employment and prohibit discrimination on the basis of race, color, creed, religion, national origin, political affiliation, disability, public assistance status, marital status, gender, sexual orientation, or age.

Please Print Clearly or Type When filling out this form, ALL questions MUST be answered. If the question does not apply to you, make "N/A" in that space.

POSITION DESIRED:

Title of Specific Position For Which You Are Applying: _____

Today's Date: _____ Date Available to Begin Service: _____

PERSONAL INFORMATION:

Last Name: _____ First Name, M.I.: _____ DOB: ____/____/____

Please list any other names you have ever been known by, or used, during your lifetime. _____

Current Street Address, City, State & Zip: _____ Previous Street Address: _____

Please list any other cities in which you have lived or worked. _____

Check the best/preferred number for contacting during work hours:

Home Phone: (____) _____ Cell Phone: (____) _____ Work Phone: (____) _____

E-mail Address: _____

May we contact you at work? Yes No

Are you legally eligible to work in the United States? Yes No

In accordance with the Immigration Reform and Control Act of 1986, the City of Hastings can only hire U.S. citizens and lawfully authorized alien workers. If hired, you will be required to provide written documentation of citizenship or legalized alien program.

Have you ever been employed by the City of Hastings before?
 Yes No If yes, Dates(s)? _____

Position? _____

Do you have relatives, other than a spouse, working for Hastings?
 Yes No If yes, relationship to you? _____

By which department are they employed? _____

EDUCATION

Type of School	Name & Address of School	Dates of Enrollment	Diploma, Degree, Certificate Earned	Major/ Area of Study	Did You Graduate?
High School		 			Y / N
Trade/Business/ Vocational					Y / N
Undergraduate Studies					Y / N
Graduate Studies					Y / N
Apprenticeship(s) Serves or Trade Learned					Y / N

List applicable courses, seminars, workshops and training programs you attended related to the position for which you are applying.

SKILLS / TRAINING / LICENSES / PROFESSIONAL MEMBERSHIPS

List relevant professional memberships, registrations or license. Include the date first issued and expiration date.

List any first aid and/or CPR training and certifications you currently hold, include the date first issued and expiration date.

Driver's License #: _____ State _____ Class _____ Exp. Date _____ Status _____

Please list any other state(s) in which you have ever had a driver's license or ID Card: _____

Please list the license or ID Card numbers issued in any other state(s) _____

EMPLOYMENT HISTORY:

Please print or type - Please give an accurate & complete record of your employment history. Start with your present or most recent employer. (You may supplement this information by attaching a resume or additional information.) DO NOT USE "Please See Resume" or other in lieu of completing this application.

Employer Name/Type of Business: _____ Phone Number: _____ May we contact? (please check one)
(_____) _____ Yes No

Street Address: _____ City, State & Zip: _____

Type of Employment (Check one) Hours/week Dates of Employment: (from month & year/to month & year)
 Full time Part time _____ / _____
 Temporary Volunteer

Your Job Title: _____ Supervisor's Name & Title: _____ Reason for Leaving: _____

Description of Major Duties:
1. _____
2. _____
3. _____
4. _____

Employer Name/Type of Business: _____ Phone Number: _____ May we contact? (please check one)
(_____) _____ Yes No

Street Address: _____ City, State & Zip: _____

Type of Employment (Check one) Hours/week Dates of Employment: (from month & year/to month & year)
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Street Address: _____ City, State & Zip: _____

Type of Employment (Check one) Hours/week Dates of Employment: (from month & year/to month & year)
 Full time Part time _____ / _____
 Temporary Volunteer

Your Job Title: _____ Supervisor's Name & Title: _____ Reason for Leaving: _____

Description of Major Duties:
1. _____
2. _____
3. _____
4. _____

REFERENCES

Please provide the name, address and phone number of three work related references. *City staff may contact these references at any point in the selection process.*

1. Name: _____	2. Name: _____	3. Name: _____
Address: _____	Address: _____	Address: _____
Phone: _____	Phone: _____	Phone: _____
Position /Relationship to your work: _____	Position /Relationship to your work: _____	Position /Relationship to your work: _____

CRIMINAL BACKGROUND CHECKS

The City of Hastings conducts criminal history background checks on all

- regular full-time or part-time employees
- seasonal or temporary employees
- paid, on-call firefighters
- volunteers who are working with children,
- police reserve officer.

For non-police positions, the city will look at the type of conviction and whether it is directly related to the job for which you are applying. Each case is considered on its individual merits and the type of work sought. However, making false statements or withholding information will cause you to be barred from employment, or removed from employment.

PHYSICAL AND PSYCHOLOGICAL EXAMINATION

You may be required to undergo a physical and/or psychological examination at the City's expense to determine whether or not you are able to perform the duties of this position in an effective and safe manner and whether or not reasonable accommodations are necessary for you.

DRUG AND ALCOHOL TESTING

The City of Hastings has adopted a drug and alcohol testing policy. The purpose of this policy is to provide for a safe public and employment atmosphere, as set forth by Minnesota State Statute 181.951. As a Police Reserve Officer applicant for any City position, you are subject to testing under the policy and may be asked to provide a urine specimen after you have received a conditional offer of employment. You may legally refuse to undergo a drug or alcohol test. If you refuse, the City's conditional offer of employment may be withdrawn. If you undergo an initial screening test with a positive test result, a confirmatory test verifying that result must be performed. You have the right to explain a confirmatory test's positive result within three working days after receiving notice. You have the right to request and pay for a confirmatory retest of the original

Candidates for positions working with children will not be selected if they have been convicted of any crime listed in the Child Protection Worker Act (Minnesota Statutes 299C.61 & 62). Generally, this includes child abuse crimes, murder, manslaughter, felony level assault or any assault crime committed against a minor, kidnapping, arson, criminal sexual conduct, and prostitution-related crimes.

Before any applicant (other than applicants for positions within the police or fire department) is rejected on the basis of criminal conviction, he or she will be notified in writing and will be given any rights afforded by Minnesota Statutes Chapter 364. This includes the right to show evidence of rehabilitation.

AUXILIARY AIDS AND ASSISTANCE

If you have a job-related disability and require a reasonable accommodation to compete in the application process, please contact the Assistant City Administrator at City Hall, 101 Fourth Street East, telephone number: (651) 480-2350 or TDD (651) 480-2350.

AUTHORIZATION AND RELEASE

The City has the right to verify information provided in the application. I may be discharged if there are any misrepresentations on this application, or my resume, or made by me in an interview which may be discovered now or anytime in the future. False information or misrepresentation may also subject me to the penalty provisions of M.S. 43A.39.

As an applicant for a position with the City of Hastings, I hereby expressly authorize the collection, use and release of any and all information concerning me, including information of a confidential or

privileged nature, which relates to my employment. Moreover, I hereby release the City of Hastings and any agent acting on its behalf from any and all liability of whatsoever nature by reason of requesting such information from any person.

- Yes
- Yes, but not current employer until the position has offered.
- No (We may be unable to hire you without this information.)

PLEASE READ CAREFULLY AND SIGN

I declare that any statement in this application or information provided is true and complete and hereby acknowledge that I have read and I understand the information as stated in the Data Practices Advisory on the previous page.

Signed: _____

Date _____