

MID-MINNESOTA DEVELOPMENT COMMISSION

APPLICATION FOR EMPLOYMENT



333 SW Sixth Street, Suite 2, Willmar, MN 56201

Telephone: (320) 235-8504

Website: <http://www.mmrdc.org>

Upon request, this application will be provided in alternative forms. We request a separate completed application for each position. You may provide additional information to help explain your qualifications. Incomplete or illegible applications will not be considered. You may attach a resume but it does not substitute for a completed application form.

***** Applicants who are offered a job will be required to successfully complete a background investigation.**

AN EQUAL OPPORTUNITY EMPLOYER
ADA REASONABLE ACCOMMODATIONS UPON REQUEST

11. **SPECIAL QUALIFICATIONS AND SKILLS:** *(typing, shorthand, foreign language, publications, scholastic honors, etc.)*

12. **EXPERIENCE:** *Start with your present job and work back, include military and volunteer experience. Additional experience should be listed by attaching separate sheets of paper or a personal resume.*

Employer 1 _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Ending Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

May we contact this employer? Yes No Notify me first

Employer 2 _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Ending Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

May we contact this employer? Yes No Notify me first

Employer 3 _____

Address _____

Phone Number (____) _____ Fax (____) _____

Job Title _____ Starting Salary _____ Ending Salary _____

Dates of Employment: From _____ to _____ Hours per week _____

Supervisor's Name _____

Reason for Leaving _____

Work Description _____

May we contact this employer? Yes No Notify me first

13. Have you ever been dismissed or forced to resign a position? Yes No

14. How did you learn about the job for which you are applying? _____

ELECTION OF VETERANS PREFERENCE

The MMDC awards Veteran's Preference to qualified veterans and spouses of deceased veterans in accordance with Minnesota Statutes, Section 197.455. Complete this section only if you are a veteran and claiming Veteran's Preference. NOTE: If you elect to use Veteran's Preference, you must provide a copy of your DD-214. Disabled veterans must also supply form FL-802 or an equivalent letter from Veterans Administration. The spouse of a deceased veteran must provide a death certificate along with other required eligibility papers.

My supporting documentation: ___ is attached ___ will be submitted by the application deadline.

Type of preference you are claiming:

___ Veteran

___ Disabled Veteran

___ Spouse of a Deceased Veteran

___ Spouse of Disabled Veteran

15. REFERENCES *(List of professional references who have closely observed your work)*

Name	Relationship	Telephone Number

DATA PRACTICES

In accordance with the Minnesota Government Data Practices Act, the Mid-Minnesota Development Commission (MMDC) 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. The information collected from you or from other agencies or individuals authorized by you is used to determine your qualifications. You are not required to provide this information; however, it is necessary to determine if you are qualified for employment. Disclosure of your social security number is voluntary, unless you are employed. If employed, you must disclose it in order to be in compliance with state and federal tax withholding laws. If you do not supply the required information, the MMDC will not be able to consider you for employment. The use of the data we collect is limited to that necessary for the administration and management of the MMDC’s employment practice. Persons or agencies with whom this information may be shared include: MMDC’s Executive Director, Finance Director, and managers and supervisors in a department where the job openings occur. Unless otherwise authorized by state statute or federal law, other government agencies utilizing the reported private data must also treat the information as private. You may exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include: the right to see and obtain copies of the data maintained on you; the right to be told the contents and meaning of the data; and the right to contest the accuracy and completeness of the data. To exercise these rights, contact the Executive Director of the MMDC.

AUTHORIZATION

Please read and sign:

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 any omission or concealment of facts, will disqualify me for consideration for employment and constitutes grounds for my immediate dismissal should I be employed by the Mid-Minnesota Development Commission (MMDC). I understand and agree that any offer of employment is contingent upon the successful completion of a criminal background investigation and a possible drug test. If a position is offered to me and I accept the position, I understand that it is my responsibility to review and comply with MMDC’s policies and procedures. I have read and understand the information regarding my rights under the Minnesota Government Data Practices Act. In connection with this application, I hereby authorize any and all current and former employers, organizations where I volunteered, and references given by me to the MMDC, to release to the MMDC and its agents any 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 MMDC will use the 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 MMDC and all former employers, volunteer organizations, and references listed herein from any and all liability of whatever nature by reason of requesting or providing such information.

In consideration of my employment, I agree that my employment and compensation can be terminated at will, with or without notice, at any time, either at my option or at the option of the Mid-Minnesota Development Commission (MMDC). I also acknowledge that no written or oral promise of employment for a specified term is effective unless expressly set forth in a document signed by an officer of the MMDC. The MMDC is an equal opportunity employer. MMDC does not discriminate in employment and no question on this is used for the purpose of limiting or excluding any applicant’s consideration for employment on the basis prohibited by local, state, or federal law. This application is current for only sixty (60) days. At the conclusion of this time, if I have not heard from the MMDC and still want to be considered for employment, it will be necessary for me to fill out a new application.

Signature of Applicant: _____

Date: _____