

Application for Employment

We welcome you as an applicant for employment with the Comfort Lake-Forest Lake Watershed District. It is the Comfort Lake-Forest Lake Watershed Districts policy to provide equal opportunity in employment. The Comfort Lake-Forest Lake Watershed District will not discriminate on the basis of race, color, creed, age, religion, national origin, marital status, disability, sex, sexual orientation, familial status, status with regard to public assistance, local human rights commission activity or any other basis protected by law.

Please furnish complete information, so we may accurately and completely assess your qualifications. You may attach any other information which provides additional detail about your qualifications for employment in the position you seek. Please note "see resume" is not an acceptable response for any entries on this application. Resumes will only be considered in addition to, but not in lieu of, this application. Please refer to the Applicant Data Practices Advisory for guidance regarding how your application information will be used, the consequences of providing or not providing your information, and more.

The Comfort Lake-Forest Lake Watershed District accommodates qualified persons with disabilities in all aspects of employment, including the application process. If you believe you need a reasonable accommodation to complete the application process, please contact Mike Kinney at 651-395-5850.

Personal Information

Name:	(Last)	(First)	(MI)
Street Address			
City, State, Zip			
Phone Number			Alternate Phone
Email			•

Please print in INK or type when completing this application Title of position applying for: Are you legally eligible to work in the United States in the position for ☐ Yes ☐ No which you are applying? Proof of citizenship or work eligibility will be required as a condition of employment. Will your continued employment require employer sponsorship?" ☐ Yes ☐ No Are you at least 18 years old? ☐ Yes ☐ No **Educational Information** Circle the highest grade completed 12345678 9 10 11 12 GED 13 14 15 16 MA MS PHD JD Grade School High School College/Technical Graduate Did you graduate: ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No College/Technical Graduate JD (Please check) High School School Name Address Course of study Degree High School: College: Graduate School: Technical/Vocational: Other:

Position-Specific Requirements	
Are you able to lift and carry approximately 50 pounds?	☐ Yes ☐ No
Are you able to withstand outside exposure and construction noise?	☐ Yes ☐ No
Do you maintain a valid driver's license?	☐ Yes ☐ No
Position-Specific Experience	
Please select your level of comfort interacting with the general public	
□ Not Comfortable □ Comfortable □ Very Comfortable	
Please describe any experience you may have interacting with the general publ	ic:
Please select your level of knowledge regarding aquatic plants \Box None \Box Minimal \Box Intermediate \Box Advanced	
Please describe any experience you may have with aquatic plants:	
Please list any current licenses, registrations, or certificates you possess which m	nav he related
to this position:	lay be related
·	

Employment Experience

List present or most recent employer first. Please note "see resume" is <u>not</u> an acceptable response for any entries on this application. Resumes will only be considered in addition to, but not in lieu of, this application.

Company	Name of last supervisor Hrs./Week	
Address	Start Date	
City, State, Zip	End Date	
Phone Number	Last job title	
Reason for leaving (be specific):		
Describe your work in this job:		
May we contact this employer?	□ Yes □ No	

Company	Name of last supervisor	Hrs./Week
Address	Start Date	
City, State, Zip	End Date	
Phone Number	Last job title	
Reason for leaving (be specific):		
Describe your work in this job:		
May we contact this employer?	☐ Yes ☐ No	
Company	Name of last supervisor	Hrs./Week
Address	Start Date	
City, State, Zip	End Date	
Phone Number	Last job title	
Reason for leaving (be specific):		
Describe your work in this job:		
May we contact this employer?	☐ Yes ☐ No	

Company	Name of last supervisor	Hrs./Week
Address	Start Date	
City, State, Zip	End Date	
Phone Number	Last job title	
Reason for leaving (be specific):		
Describe your work in this job:		
May we contact this employer?	☐ Yes ☐ No	
Unpa	id Experience	9
Describe any unpaid or volunteer expe (you may exclude, if you wish, informat other protected status).	rience relevant to the position	n for which you are applying

Military Experience

Did you serve in the U.S. Armed Forces?] Yes □ No
Describe your duties:	
Do you wish to apply for Veterans' Preference	points: 🗆 Yes 🗆 No
If you answered "yes," you must complete the	enclosed application for Veterans' Preference
points, and submit the application and require	ed documentation to the Comfort Lake-Forest
Lake Watershed District by the application de	adline of the position for which you are applying.
Autho	rization
Autilo	nization
I certify that all information I have provided	d in this application for employment is true and
complete to the best of my knowledge. Any	misrepresentation or omission of any fact in my
application, resume or any other materials,	or during any interviews, can be justification for
refusal of employment, or if employed, will	be grounds for dismissal, regardless of length of
employment or when the misrepresentation	n or omission is discovered.
I acknowledge that I have received a copy of	of the job description summary for the position/s
for which I am applying. I further acknowled	edge my understanding that employment with
the Comfort Lake-Forest Lake Watershed [District is "at will," and that employment may be
terminated by either the Comfort Lake-For	rest Lake Watershed District or me at any time,
with or without notice.	
With my signature below, I am providing th	ne Comfort Lake-Forest Lake Watershed District
	ovided within this application packet, including
contacting current or previous employers. H	lowever, I understand that if, in the Employment
Experience section I have answered "No"	to the question, "May we contact your current
employer?", contact with my current em	ployer will not be made without my specific
authorization.	
I have read the included Applicant Data Pr	actices Advisory, and I further understand that
• •	(after I have been selected for an interview, in
7	nd that a conviction of a crime related to this
position may result in my being rejected to	for this job opening. I also understand it is my
responsibility to notify the Comfort Lake-F	orest Lake Watershed District in writing of any
changes to information reported in this app	olication for employment.
Signature	Date
-	

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 Comfort Lake-Forest Lake Watershed District 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. 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 Comfort Lake-Forest Lake Watershed District.

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)	(M	1)	Position For Which You	Applied
				Closing Date:	
Address (Street)	(City)	(State)	(Zip)	Phone Number	Are you a US Citizen or
					Resident Alien?
					☐ Yes ☐ No

VETERAN (10 points):		
("Member Copy 4" of DD214 or DD215, or opoints)	other documentation verifying serv	rice, must be submitted to receive
Honorably discharged veteran	☐ Yes ☐ No	
DISABLED VETERAN (15 points): ("Member Copy 4" of DD214, or other do decision of 10% or more must be submitted percent of Disability:%		
Have you ever been promoted wi	ithin the CLFLWD's employment?	☐ Yes ☐ No
SPOUSE OF DECEASED VETERAN (10 po ("Member Copy 4" of DD214 or DD215, certificate, spouse's death certificate and to receive points. You are ineligible to receive Date of Death:	or other documentation verifying proof veteran died on or as a result eive points if you have remarried o	g service, photocopy of marriage of active duty must be submitted
SPOUSE OF DISABLED VETERAN (15 point ("Member Copy 4" of DD214 or DD215, or containing decision of 10% or more must be sufficient."	other documentation verifying serv	vice, and USDVA letter of disability
How does Veteran's disability prevent per connected disability the veteran is unable		
AFFIDAVIT: I hereby claim Veterans' the information given is true, com acknowledge that I am responsible documents and submit them to the Capplication deadline.	plete and correct to the best to obtain the required Veto	t of my knowledge. I hereby erans' Preference verification
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.
- 2) 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 qualify for disabled veteran preference per Minn. Stat. §§ 197.455 and 197.447.
- 3) 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 Comfort Lake-Forest Lake Watershed District. Please contact our office at 651-395-5850 or your local County Veterans' Service Office, if you have any questions regarding veterans' preference.

COMFORT LAKE-FOREST LAKE WATERSHED DISTRICT

Data Practices Advisory Watercraft Inspector

The District is providing this advisory as required by the Minnesota Data Practices Act, Minnesota Statutes §13.04, subdivision 2. This advisory is known as a "Tennessen warning."

Certain information you are being asked to provide in the application for the Technician position is classified by state law as private data. Specifically, other than veteran status, relevant test scores (if any), job history, education and training, and work availability, all information that you submit is classified as private data. The District generally cannot make your private data available to the public, but you may view the data.

The District will use the information you provide to distinguish you from other applicants, determine your eligibility for employment, enable the District to contact you, and enable the District to ensure your rights to opportunities.

You are not legally required to provide private data in your application. However, your choice not to supply information necessary for the purposes noted above will mean that your application for employment may not be considered or your qualifications may not be able to be fully evaluated.

Only District staff and members of the District board of managers assessing candidates for the position, as well as District consultants specifically tasked to participate in candidate review, will have access to the private data you provide. However, private data in your application may be disclosed in a public meeting of the District board if the disclosure relates to a matter within the scope of the board's authority and is reasonably necessary to conduct the agenda item before the board. The District may provide your private data to another government agency when that agency is authorized by statute or federal law to have access, and may disclose private data pursuant to court order.

If you are offered the position to which you are applying, and you accept employment with the District, your name and previous work experience also will become public information.

Please contact the District with any questions about this advisory or the District's handling of the information in your application.

I have received and read the above Tennessen warning:

Signature:	 Date:	
Print name:		

This page intentionally left blank

Equal Employment Opportunity Information

The information asked of you will be used to evaluate our overall efforts in reaching all segments of the population. The following information is VOLUNTARY and CONFIDENTIAL. This information is NOT A PART of the application file and is REMOVED from the application when received by our office. The Comfort Lake-Forest Lake Watershed District appreciates your cooperation in our efforts to ensure affirmative action and equal opportunity.

Position(s) for which you are applying:
Gender: □ Male □ Female □ Non-binary
With which racial/ethnic group do you identify?
□ Black or African American
☐ Hispanic or Latino
☐ American Indian or Alaskan Native through Tribunal affiliation or community
recognition
☐ Caucasian/White
□ Asian
□ Native Hawaiian or other Pacific Islander
☐ Two or more races
Disability status, defined as:
1) Has a physical or mental condition that substantially or materially limits a major
life activity (such as walking, talking, seeing, hearing or learning); 2) Has a history of a disability (such as cancer that is in remission);
3) Is regarded as having such an impairment.
Do you claim disability status? ☐ Yes ☐ No
Do you claim disability status: