

# CITY OF JORDAN

210 East First Street  
 Jordan, MN 55352  
 952-492-2535



## Employment Application

APPLICANT INFORMATION			
Last Name	First Name	Middle Name	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available			
Position Applied for:			
Can you perform the essential functions of the position for which you are applying? <input type="checkbox"/> YES <input type="checkbox"/> YES, with reasonable accommodation			
Are you over 18 years old?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you legally eligible to work in the U.S.? (If offered employment, you will have to provide proof of your eligibility.)    YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for the City?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
STATEMENT OF INTEREST: Give a brief statement of why you are interested and feel qualified for the position:			
_____			
_____			
_____			
_____			
EDUCATION/TRAINING			
High School	Address		
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Post-Secondary	Address		
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Post-Secondary	Address		
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Post-Secondary	Address		
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
List academic honors you received or extracurricular activities in which you participated during school:			
_____			
_____			
_____			
_____			

**PREVIOUS EMPLOYMENT**

Please list your employment history for the **past ten (10) years**. Begin with most recent employment. Attach additional pages if necessary.

Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Wage \$	Ending Wage \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Wage \$	Ending Wage \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Wage \$	Ending Wage \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

**OTHER: Please account for any period of unemployment of at least 30 days and/or part-time employment not listed above.**

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Have you ever been involuntarily terminated from employment? YES  NO  If yes, state name and address of company and reason for termination.

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**MILITARY SERVICE**

Branch	From	To
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Rank at Discharge	Type of Discharge
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If other than honorable, explain

Claiming Veterans Preference?

[ ] Yes [ ] No

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Veterans who served on active duty in the U.S. Armed Forces and were separated under honorable conditions may be eligible for veterans' preference. When claiming preference, veterans must provide a copy of their DD-214, Certificate of Release or Discharge from Active Duty, or other acceptable documentation. Applicants claiming 10 point preference will need to submit their DD-214, for a 10-point Veterans' Preference. If you have questions about the applicability of veterans' preference for a particular vacancy, please contact the City of Jordan.

Provide a copy of current status of orders.

Tasks/responsibilities within military:

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List volunteer work you have performed:

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**REFERENCES**

*Please list three professional references.*

Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

**SPECIAL SKILLS**

Please identify any special skills, licenses, certifications, other education, training, or other information that you wish to be considered:

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The City of Jordan is an equal employment opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, sexual orientation or age.

**INFORMATION RELEASE / DISCLAIMER / AND SIGNATURE**

I understand that information I have provided in this written application may be classified as public per Minnesota State Statutes, Chapter 13. I authorize the City of Jordan the right to solicit and receive verification of all information contained in this application for employment from any and all sources that are necessary, in the opinion of the city, to verify the information I have provided. Verification may include completing a background check utilizing criminal history, credit check, and character references. I hereby hold the City of Jordan harmless and waive my right to pursue action against the city for denial of employment based on information reasonably obtained from other sources about my application.

**Signature**

**Date**

In the event of an offer and acceptance of employment with the City of Jordan, I understand that false or misleading information provided by me in this application is grounds for termination of employment without recourse. I further understand that employment with the City is subject to all policies, procedures, and rules maintained by the city or individual departments.

I certify that my answers are true and complete to the best of my knowledge.

**Signature**

**Date**

