

February 6, 2013

Dear Applicant:

Thank you for expressing interest in the Police Officer or Police Officer/Paramedic position. This application packet has been prepared to assist you in the completion of all materials necessary to be considered for this position. If you require a special accommodation to complete the application materials, please contact me at (651) 458-2883.

In the materials provided, you will find the City of Cottage Grove Application for Employment, Supplemental Application, Job Description, Benefits Summary, Equal Opportunity Employment/Affirmative Action Form and Election of Veteran's Preference form. Completed Application for Employment and Supplemental Applications are required to be considered for this position. Attaching your resume to the applications is strongly encouraged.

*When completing the application forms, please keep the following in mind. Be sure to indicate which position you are applying for on the first page, in the gray box. Be sure to review the job posting and job description, and to make sure you clearly indicate that you meet the minimum education and experience requirements for the position. If the job description lists duties and responsibilities you have experience with, please make sure to indicate this experience in the application or attached resume. Clear, precise information is very important in helping City staff to review your credentials for the position, especially when there are large numbers of applicants.*

The Equal Opportunity Employment/Affirmative Action Form in no way affects you as an individual applicant. Submission of this form is voluntary. This information is used to find how effective our recruitment efforts are in reaching all segments of the population and in validation of our selection methods. Upon receipt the form is removed and kept separate from the application.

If you are a veteran and wish to claim a veteran's preference, please complete and submit the Election of Veteran's Preference form. If you elect to use a veteran's preference, you will be required to present documentation establishing your right to claim the preference. If you are not a veteran, please select the "No" box at the bottom of the form and sign your name.

If you have any questions regarding the application packet, please do not hesitate to contact me at (651) 458-2883, or by email at [jfischbach@cottage-grove.org](mailto:jfischbach@cottage-grove.org).

The deadline for this position is Friday, February 22nd at 3:30 PM.

Sincerely,



Joe Fischbach  
Human Resources Manager



JOB POSTING  
**City of Cottage Grove**

Position: Police Officer or Police Officer/Paramedic  
2013 Starting Pay: \$24.87- \$27.16/hr DOQ  
Contact: Joe Fischbach, Human Resources Coordinator  
(651) 458-2883  
Application Deadline: Monday, February 22, 2013 at 3:30 pm (not postmarked)

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The City of Cottage Grove is recruiting for the position of Police Officer or Police Officer/Paramedic.

The Cottage Grove Public Safety department provides basic life support (BLS) and advanced life support (ALS) emergency medical services to the community and neighboring communities. This is accomplished by utilizing Firefighter/Paramedics in the Fire department and several Police Officers that are also certified Paramedics. If you are interested in a rewarding career not only as a Cottage Grove Police Officer but also a practicing Paramedic, we encourage you to apply for this position. If selected to become a registered Paramedic by the Public Safety Director, training and wages to become registered would be paid for by the City. Currently, Police Officers who are also registered Paramedics receive an additional 7% above the Police Officer wage.

Applications will be accepted from among three career tracks:

- **Lateral Transfers** – sworn officers from another police department;
- **Entry Level Candidates** – persons with little or no law enforcement experience who have completed skills and the POST test; and
- **Accelerated Recruitment Candidates** – persons who are registered paramedics and will be POST-eligible within 12 months.

Minimum Requirements – Lateral Transfers

- (1) Licensed or eligible to be licensed as a peace officer in the state of Minnesota.
- (2) Current employment in law enforcement.
- (3) One year or more sworn experience in law enforcement and no longer a probationary employee with current employer.

- (4) Possession of a valid driver's license.
- (5) Must be a non-smoker.

Minimum Requirements – Entry Level

- (1) Eligible for licensure as a peace officer by the Minnesota POST Board by the time of appointment.
- (2) Possession of a valid driver's license.
- (3) Must be a non-smoker.

Minimum Requirements – Accelerated Recruitment

- (1) Certification as a Paramedic, or eligible for certification by the appointment date, either through the National Registry of Emergency Medical Technicians or the Minnesota Department of Health.
- (2) Eligible for POST license within twelve (12) months of appointment.
- (3) Valid drivers' license.
- (4) Must be a non-smoker.

**Application packets are available at Cottage Grove City Hall, 12800 Ravine Parkway S., Cottage Grove MN or online at [www.cottage-grove.org](http://www.cottage-grove.org). For more information call Joe Fischbach at (651) 458-2883, or email at [jfischbach@cottage-grove.org](mailto:jfischbach@cottage-grove.org). For information on how to become POST eligible call the Minnesota State POST Board at (651) 643-3060.**



## 2013 Benefits Summary Sheet Cottage Grove Police Officers Union

*This is a summary of City benefits, all employees should consult the labor agreement and/or personnel policy for the exact language pertaining to pay and benefits.*

### **MN Public Employees Retirement Association (PERA)**

All members contribute 9.6% of their gross pay into their PERA retirement account on a pretax basis. The City also contributes 14.4% of an employee's gross pay to PERA, which PERA uses to fund the state run defined benefit pension plan.

### **Deferred Compensation**

Employees also have the option of participating in a deferred compensation plan. All monies that go into this plan are on a pretax basis. The City offers 2 plans the employee may choose from, ICMA or the Minnesota State Deferred Compensation Plan. The minimum an employee must contribute is \$10.00 per pay period and the maximum is \$17,500/year which translates into \$673.08 per pay period. If the employee is over 50 there is also a catch-up provision where an employee can contribute an additional \$5,500 per year.

### **Health Insurance**

All new full-time employees must take at least single medical coverage. Preventative dental is included in all of the City's health plans. The City contribution for 2013 is as follows:

The EMPLOYER contribution for 2013 will be as follows:

<b><u>Passport</u></b>	<b>Monthly</b>		
	<b>Premium</b>	<b>Employer</b>	<b>Employee</b>
Single	\$402.34	\$402.34	\$0.00
Single + 1	\$844.91	\$591.44	\$253.47
Single + Children	\$764.44	\$535.11	\$229.33
Family	\$1,126.54	\$788.58	\$337.96

<b><u>Elect</u></b>	<b>Monthly</b>		
	<b>Premium</b>	<b>Employer</b>	<b>Employee</b>
Single	\$370.15	\$370.15	\$0.00
Single + 1	\$777.32	\$544.12	\$233.20
Single + Children	\$703.26	\$492.28	\$210.98
Family	\$1,036.42	\$725.49	\$310.93

### **HSA Passport Plan**

Single- 100% of premium  
Single + One- 70% of premium  
Single + Children- 70% of premium  
Family- 70% of premium

### **HSA Elect Plan**

Single- 100% of premium  
Single + One- 70% of premium  
Single + Children- 70% of premium

Family- 70% of premium

Both plans have a, \$4,500- single and \$9,000- all others, deductible. However, the employee will be responsible for, \$2,500- single and \$5,000- all others, of the deductible amount. The remainder will be covered by the employer through a HRA. Of the \$2,500/\$5,000 amount the employer will contribute \$1,000/\$2,000 in to the employee's HSA, on a matching basis. The employer contribution amount is provided on a matching basis of 2 (two) employer dollars for every 1 (one) dollar contributed by the employee, up to the annual employer maximum. The employer HSA contributions will be made in four equal payments, the first pay dates in January, April, July and October. Both plans will have an imbedded deductible. There is an 80/20 payment arrangement once the deductible is met, whereby the insurance company pays 80 percent and the employee/employer pay the other 20 percent, up to an out of pocket maximum. The out of pocket maximums are, \$5,800- single and \$11,600- all others. If the employee/employer experience out of pocket costs, the employer will cover the first \$850- single and \$1,700- all others. The employee is then responsible for \$450- single and \$900- all others.

Employees currently receiving waiver compensation will continue to receive waiver compensation. It will be \$225/month for full-time employees and \$112.50/month for regular part-time benefit eligible employees. Employees who waive but do not receive waiver compensation may still waive but will not receive any waiver compensation. All new employees must enroll in a minimum of single medical coverage. If an employee receiving waiver compensation elects City insurance and then waives again in the future, they will not be eligible for the waiver compensation.

### **Supplemental Dental**

The City offers supplemental dental as an optional benefit at 100% cost to the employee. For single coverage the premium is \$29.05 per month. For single plus one the premium is \$59.60 per month. For family coverage the premium is \$95.85 per month.

### **Life Insurance**

The City pays for \$20,000 in term life insurance. Employees also have the option of purchasing supplemental life insurance for themselves and their dependents as an out-of-pocket cost, up to \$200,000 for the employee, \$100,000 for his/her spouse and either \$5,000 or \$10,000 for children.

### **NCPERS Life Insurance (PERA Life)**

This is an optional life insurance plan that costs \$16.00 per month. It is a group term life and accidental death & dismemberment plan for employees. It also has group term life for the employee's spouse and eligible dependents.

### **Workers Compensation Insurance**

All employees are covered by workers compensation insurance.

### **Injury on Duty**

If an employee is injured on the job the City will supplement whatever the injured employee is paid by workers compensation up to base pay, up to 60 days.

### **Long-term Disability**

Each employee receives \$29.00 per month as taxable income to purchase long-term disability coverage. It covers 60% of their pay. Coverage for long-term disability starts on the 91<sup>st</sup> day of injury or illness. The benefits received under LTD are currently not subject to income taxes, the premium is taxed instead.

### **Short-term Disability**

After an employee has passed probation the City self funds a short-term disability plan. This coverage starts on the 21<sup>st</sup> day of an injury or illness and may cover up to 90 days.

### **Annual Leave**

In lieu of vacation and sick pay the City has Annual Leave which can be used for either purpose. Employees with 0 to 7 years City employment accrue 5.54 hours per pay period. Employees with 8 to 15 years City employment accrue 7.39 hours per pay period. Employees with 15+ years City employment accrue 8.00 hours per pay period. No employee may carry over more than 240 hours of Annual Leave from one year to the next. If any employee's balance is above 240 those hours are forfeited.

### **Holidays**

All employees get credit for 88 hours of holiday pay, leaving a work schedule commitment of 1992 hours. Each employee receives 56 hours of pay at his or her regular rate of pay with the first check in June of each year. Each employee receives another 56 hours of pay at his or her regular rate of pay with the first paycheck in December of each year. Each employee also receives 8 hours of floating holiday pay.

### **Uniform Allowance**

All employees receive a uniform allowance of \$775 per year to purchase City approved uniforms and equipment after they get their initial issue and pass probation.

### **Health Care Savings Plan (HCSP)**

Each employee shall contribute 1% of their gross salary through payroll deduction to an individual Health Care Savings Plan. Also, upon separation from employment with the City, 50% of any unused annual leave will be deposited into the Health Care Savings Plan.

**TITLE:** Police Officer / Paramedic  
**DEPARTMENT:** Public Safety  
**ACCOUNTABLE TO:** Police Sergeant

## JOB OBJECTIVES

To maintain public order, protect life and property, prevent and detect crime, enforce laws and ordinances, provide emergency services in a professional manner that will command public confidence and respect at all times.

## ESSENTIAL JOB FUNCTIONS

- a. Respond to and handles or refers all requests for public safety services.
- b. Effectively patrol assigned areas within the city of Cottage Grove in a vehicle or on foot.
- c. Investigate complaints involving violations of city ordinances and state and federal laws.
- d. Investigate traffic accidents within the city.
- e. Monitor traffic problems within the city to ensure the orderly flow of pedestrians and vehicle traffic.
- f. Apprehend perpetrators and/or suspects involved in criminal activity.
- g. Prepare reports covering all phases of public safety activities.
- h. Ensure proper maintenance and safe operation of all public safety vehicles and equipment.
- i. Maintain effective community relations within the city and law enforcement community.
- j. Improve and maintain individualized public safety skills.
- k. Assist in the operation of the animal control program as directed.
- l. Maintain medical knowledge and skill as established by medical directors and perform as paramedic.
- m. Keep appropriate supervisors advised of patrol developments and perform all other duties as apparent or assigned.
- n. Respond to medical calls when needed.
- o. Act as a credible witness in court testimony or similar proceedings.
- p. Perform all other necessary duties as apparent or assigned.

## MINIMUM REQUIREMENTS

- a. Certification as a Paramedic, or eligible for certification by the appointment date, either through the National Registry of Emergency Medical Technicians or the Minnesota Department of Health.
- b. Candidate must be licensed or eligible to be licensed as a Minnesota Police Officer in accordance with the standards established by the Minnesota Peace Officers Standards and Training Board.
- c. Candidate must possess a valid driver's license.

## KNOWLEDGE, SKILLS AND ABILITIES

- a. Ability to establish and maintain effective working relationships with elected officials, City employees and the public.

## DEFINITION OF PHYSICAL DEMANDS

### DEFINITION

### OUT OF AN 8 HR DAY

Rarely	Less than 10% of time on a shift	Up to 48 minutes
Occasionally	Up to 33% of time on a shift	Up to 2 1/3 hours
Frequently	Up to 66% of time on a shift	Up to 5 1/2 hours
Continuously	67-100% of time on a shift	Up to 8 hours

## PHYSICAL DEMANDS

**STANDING:** To take or maintain an upright position on the feet.

FREQUENTLY, on all surfaces during calls for service, traffic stops, presentations, and crime scenes.

**SITTING:** To rest with the body supported upon the buttocks and the torso vertical.

FREQUENTLY, on car seats and office chairs when patrolling or performing office duties.

**WALKING:** To go or advance on foot; move by steps.

FREQUENTLY, on all surfaces when called to duty, on foot patrol or mall patrol, and on traffic stops.

**TALKING:** To articulate in words.

CONTINUOUSLY, when talking to citizens and suspects.

**SEEING:** To perceive with the eye; visualize.

CONTINUOUSLY, when observing surroundings, performing basic duties.

**HEARING:** To perceive sound by the ear.

CONTINUOUSLY, when observing surroundings, listening to the police radio and citizens, listening for suspicious sounds or noises.

**LIFTING:** To exert strength necessary to move objects from one level to another.



	<b>NEVER</b>	<b>RARELY</b>	<b>OCCAS</b>	<b>FREQ</b>	<b>CONT</b>
Under 10#					X
10 - 25#					X
25 - 50#					X
50 - 75#				X	
75 - 100#			X		
Over 100#			X		

Lifting activities include bags, brief case, people, bicycles, evidence, equipment.

**CARRYING:** Transporting an object, usually holding it in the hands or arms or shoulders.

	<b>NEVER</b>	<b>RARELY</b>	<b>OCCAS</b>	<b>FREQ</b>	<b>CONT</b>
Under 10#					X
10 - 25#					X
25 - 50#					X
50 - 75#				X	
75 - 100#			X		
Over 100#			X		

Carrying activities include brief case, people, duty bag, bicycles, animals.

**PUSHING\PULLING:** To exert force on or against an object, to move it away, or draw it to oneself.

OCCASIONALLY, due to pushing vehicles and arresting criminals.

**CLIMBING:** To ascend or descend ladders, scaffolding, stairs, poles or inclined surfaces.

OCCASIONALLY, due to going over fences, stairs, responding to calls.

**WORKING ABOVE GROUND:**

RARELY, when called to decks, roofs, sniper positioning.

BENDING: To flex an upper trunk forward.

FREQUENTLY, when getting out of car, picking up equipment.

BALANCING: To maintain body equilibrium.

CONTINUOUSLY, when walking, riding bicycle, assisting people in need.

CROUCHING\STOOPING: To flex an upper trunk forward at the waist; partial flexion of knees.

FREQUENTLY, when moving to car, searching for evidence and suspects.

KNEELING: Bending the legs at the knees to come to rest on the knee or knees.

OCCASIONALLY, when shooting or providing cover, coax an animal out of an area, helping fallen people.

CRAWLING: To move entire body along a surface with hip\knee flexion and arm extension\flexion.

RARELY, when taking cover, going under obstacles, searching for suspects.

TWISTING: To rotate upper trunk to right or left from neutral, while sitting or standing.

FREQUENTLY, when walking, running, moving in car, working at a desk, dealing with calls.

REACHING: To position arms with any degree of elbow flexion.

FREQUENTLY, when moving items in a vehicle, driving, using flashlight, picking up items.

COORDINATION (eye, hand, foot): Operation of foot and hand controls.

CONTINUOUSLY, when driving, shooting a gun, using a computer.

HAND COORDINATION	Right	Left	Both	How Often
Power Grip			X	Frequently
Pinch Grip			X	Frequently

Fine Manipulation			X	Frequently
Wrist Rotation			X	Frequently

#### MACHINES, TOOLS, EQUIPMENT USED

Gun, handcuffs, portable radio, baton, pepper spray, flashlight, office supplies, computers, MDC's, taser, and various hand tools.

#### MATERIALS AND PRODUCTS HANDLED

People, O.C. spray, ammunition, blood, urine, pepper spray, first aid supplies, office supplies, property and evidence items, various hazardous materials.

#### VEHICLES AND EQUIPMENT USED

Squad car or truck, van, ambulance, bicycles.

#### ENVIRONMENTAL CONDITIONS

Typically, 75% of the day is spent outside and 25% of the day is spent inside.  
Toxic fumes from fires, weather, dust, mold, constant noise in squad car, bleeding people, people trying to hurt officers.

#### SAFETY EQUIPMENT REQUIRED

Body armor, pepper spray, baton, firearm, gloves, sunglasses, earmuffs, seat belt, helmet, warm clothing and boots, bio-hazard shield, gas mask, first aid kit, fire extinguisher.

REVIEWED MAY 2009  
REVISED OCTOBER 2003

**SUPPLEMENTAL APPLICATION  
POLICE OFFICER OR POLICE OFFICER/PARAMEDIC**

Applicant Name \_\_\_\_\_ Date \_\_\_\_\_

Check the following boxes that best apply to you. Provide information as requested.

Are you willing to become a registered and practicing paramedic if hired? Training and wages would be paid for by the City.

Yes  No

I am applying through the following program (select one):

- Lateral Transfer Program – Currently employed experienced sworn officer
- Entry Level – Persons with little or no law enforcement experience who have completed skills and passed the POST exam.
- Accelerated Recruitment Program – Current certification as a Paramedic, or eligible for certification by the appointment date, who will be obtaining their POST license within the next 12 months.

**If you are applying through the LATERAL TRANSFER PROGRAM, please answer the following:**

Your Minnesota POST Peace Officer License Number:

Current law enforcement agency:

Have you completed probation?  Yes  No

Years of service with your current department:

List other law enforcement agencies where you were employed:

Total years of law enforcement experience:

List any special law enforcement training or skills you have:

**If you are applying through the ENTRY LEVEL PROGRAM, please answer the following:**

Note the location and dates where you completed an Associate of Arts degree in law enforcement, or a higher degree in a related field:

Note the location and dates where you completed your Skills program:

Have you passed the Minnesota POST exam for full-time peace officer?

Yes  No

When did you test? Or when do you intend to test?

**If you are applying through the ACCELERATED RECRUITMENT PROGRAM, please answer the following:**

If you are a nationally registered paramedic, please list your National Register of Emergency Medical Technicians License #:

If you are a Minnesota registered paramedic, please list your Minnesota Emergency Medical Services Regulatory Board License #:

Please check the appropriate box below. Check all that apply.

- I will be a certified Paramedic by the time of appointment. (Please provide a brief description of your Paramedic training status.)
- I have passed the Minnesota POST Board test for a full-time peace officer's license and I am eligible to be licensed.
- I will be eligible to be licensed as a full-time Minnesota peace officer within twelve (12) months. (Please provide a brief description of your peace officer training status.)

All applicants are encouraged to attach a resume to the completed application packet.

Thank you for your interest in pursuing your career with the City of Cottage Grove.



City of  
**Cottage Grove**  
Minnesota

## **P. R. I. D. E.**

**MISSION:** to improve the quality of life and to enhance the spirit of our community and its employees through.....

**Personal service Responsiveness Innovation Dedication Effectiveness**

### **Personal service:**

- We are committed to effective communications; being aware of citizen needs.
- We believe in the value of each citizen.
- We promptly follow up and follow through.

### **Responsiveness:**

- We work to build trust by being open, honest, consistent and fair.
- We are aware of the environmental consequences of our actions
- We respect and are sensitive to community values and needs.

### **Innovation:**

- We are dedicated to professional growth and initiative for all City employees.
- We are open to creativity and changes – standing still means falling behind.
- We dare to be the best and have fun doing it.

### **Dedication:**

- We are committed to ideals of democracy and citizen participation.
- We support the elected officials in representation of their constituents.
- We hold ourselves to high standards of ethical behavior and stewardship.

### **Effectiveness**

- We are committed to achieving excellence through leadership and teamwork.
- We strive for high production and quality results.
- We take individual responsibility for organizational performance.

We are FIRST, LAST and ALWAYS a public service organization. We exist because the citizens are willing to pay taxes and give up a certain level of individual freedom, in exchange for a City government that meets their collective needs. The good will of that citizenry is the most important resource we have; it must be cherished and nurtured.



City of  
**Cottage Grove**  
Minnesota

Dear Applicant:

It is our policy to provide equal opportunity employment. This policy prohibits discrimination on the basis of race, color, sex, creed, marital status, religion, national origin, age (18 and over), sexual orientation, disability, an adherence to any political affiliation, criminal convictions which are not related to the position you are applying for, or status with regard to public assistance. This policy applies to full-time, part-time, temporary and seasonal employment.

The information contained in this application is considered private, except for your veteran status, relevant test scores, job history, education and training, and work availability, and used only in conjunction with your possible employment. Please furnish complete information, as failure to provide the data required by this application may result in rejection of your application.

<b>Print title of specific position for which you are applying</b>	
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal	
Date available to work:	Today's date:
Pay expected:	Will you work overtime if required? <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>PERSONAL</b>		
Name (last)	(first)	(middle)
Street Address:		
City, State, Zip:		
Phone #:	E-mail Address:	
Have you previously been employed by the City of Cottage Grove? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, dates:    department:		
Do you have any relatives working for the City? <input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, name of relative:		
Do you have a valid driver's license: <input type="checkbox"/> Yes <input type="checkbox"/> No		

## EDUCATION

Did you graduate from high school or receive a GED?

Yes  No      If under 18, state your age:

School	Name & Location	Certificate/Degree
High School		
Vocational/ Technical		
College/ University		
Other		

Please list academic honors, scholarships, fellowships, memberships in professional and honorary societies and any other extra-curricular activities:

## EXPERIENCE

If relevant, list other current professional registrations, license or certificates you have.

License/Certificate/ Registration	Date Issued	Date of Expiration

### TO BE COMPLETED BY CLERICAL APPLICANTS ONLY

TYPING ABILITY:                       YES    NO    WPM \_\_\_\_\_

SHORTHAND ABILITY:                 YES    NO    WPM \_\_\_\_\_

Please indicate office equipment you can operate	Yes	No
Dictating Equipment		
Word Processor		
Computer Software Applications		
Other office equipment you can operate:		



Please begin with your most recent or current employer:

<b>EMPLOYMENT HISTORY</b>		
Company name:		Telephone:
Address		City, State, Zip
Name of Supervisor	Employed (month & year) From:            To:	Weekly Pay
Reason for leaving:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
State job title and describe your work:		

<b>EMPLOYMENT HISTORY</b>		
Company name:		Telephone:
Address		City, State, Zip
Name of Supervisor	Employed (month & year) From:            To:	Weekly Pay
Reason for leaving:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
State job title and describe your work:		

<b>EMPLOYMENT HISTORY</b>		
Company name:		Telephone:
Address		City, State, Zip
Name of Supervisor	Employed (month & year) From:            To:	Weekly Pay
Reason for leaving:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
State job title and describe your work:		

### REFERENCES

Please provide the name, address and phone number of three references who are **not** related to you and are **not** previous employers.

(Name, Address, Phone)

1.

2.

3.

### SIGNATURE

I certify that the information contained in this application (and accompanying resume, if any) is correct, and I have not omitted or misstated any information. I understand that falsification or omission of information may disqualify me from further consideration for employment or result in immediate dismissal if I am hired and the information is discovered at a later date.

I authorize the schools, references and my prior employers listed above to provide my record, reason for leaving and all other information they may have concerning me, and I release all parties from all liability or claims for damages whatsoever that may result from the release of the information.

Date \_\_\_\_\_ Signature \_\_\_\_\_

### POLICY OF NON-DISCRIMINATION

The City of Cottage Grove does not discriminate on the basis of disability in the admission or access to, or treatment or employment in, its programs or activities. The Assistant City Administrator has been designated to coordinate compliance with the non-discrimination requirements contained in section 35.107 of the Department of Justice regulations. Information concerning the provisions of, and the rights provided under the Americans with Disabilities Act are available from the Assistant City Administrator.

### EQUAL EMPLOYMENT OPPORTUNITY STATEMENT

The City of Cottage Grove prohibits discrimination on the basis of race, color, sex, creed, marital status, religion, national origin, age (18 and over), sexual orientation, disability, adherence to any political affiliation, criminal convictions which are not related to the position you are applying for, or status with regard to public assistance.

**EMPLOYMENT ELIGIBILITY AND IDENTIFICATION STATEMENT OF UNDERSTANDING**

Federal law requires that employees verify eligibility for U.S. employment and identity. An employer must decline to hire an individual if a new employee fails to present adequate proof of eligibility and identity within three (3) days of the commencement of employment.

Should you be hired by the City of Cottage Grove, you will be asked to submit an ORIGINAL of one of the following documents:

- 1) If you are a U.S. citizen:
  - a) A U.S. passport;
  - b) A driver's license, school identification card with photo, or voter's registration
- 2) If you are not a U.S. citizen:
  - a) A document to show eligibility to work by showing a resident alien card (I-551 or I-151) that contains your photo or an unexpired foreign passport with an unexpired I-551 stamp.
  - b) Non-resident aliens must show a I-94 form attached to their passport which indicates they are authorized to work, or show proper identification and other documentation from the INS proving work authorization.

If you are hired for the position for which you are applying, you must provide the required documentation within three (3) business days of your first date of employment. Since the City cannot employ you without the required documents, it is essential that you have the documents available; if you do not have them, apply for them now.

I have read the above and understand that I will be asked to submit the required proof of my identity and eligibility for U.S. employment and that I will be required to attest, under penalty of perjury, the documents presented are genuine and related to me.

Date \_\_\_\_\_ Signature \_\_\_\_\_

**ABSENCE OF CONTRACT**

I realize that this application is in no way a contract.

Date \_\_\_\_\_ Signature \_\_\_\_\_

## **MINNESOTA DATA PRACTICES ACT**

The Minnesota Data Practices Act seeks to protect the privacy of individuals about whom government agencies and their subdivisions, and agencies under contact with the government collect data. The Act also facilitates a release of information which is public. The information on this sheet applies to your current and future contacts with the City of Cottage Grove, whether the contact is in person, by mail, or by phone.

The Act requires that whenever the City asks you to provide information which is private or confidential, that you be told:

1. The purpose and intended use of the data within the City;
2. The legal requirements, if any, of providing the information;
3. The consequences of providing or refusing to provide the information requested;
4. The identity of other persons or agencies authorized by statute to receive the information.

### **I. Purpose of the information collected:**

1. Determine whether you meet City requirements pertaining to the eligibility for employment.
2. Evaluate the employment application.
3. Investigate the accuracy of all information and statements contained in the application.
4. Investigate and collect background information pertaining to you to determine your qualifications and fitness for employment with the City.

### **II. Legal Requirements**

You are not legally required to provide the information requested. If you do not provide the information requested, the City will not be able to determine your eligibility for employment and your application will, in all likelihood, be denied if you do not provide the information requested.

### **III. Sharing of Information**

The data provided pursuant to the employment application may be shared with officers and employees of the City who have a need to know such information in order to process and make a decision on a recommendation concerning your employment, and ultimately a determination by the governing body concerning your employment.

1. This information may be provided to others in the following circumstances:
  - a. To individuals, persons, agencies, institutions or organizations you authorize sharing the information with by means of a valid consent for release of information.
  - b. To appropriate law enforcement personnel who are acting in an investigation on proceedings relating to the application.
  - c. To a Court pursuant to a valid court order.

#### **IV. Other Rights:**

You have the right to know what information is maintained about you; you have the right to view all public and private information about you maintained by the City, and this includes the right for you to authorize other persons or agencies to view it.

1. You have the right to have the data to which you have accessed explained to you.
2. You have the right to request copies of the information to which you have access, but you may be charged a reasonable fee for the cost of the copies.
3. You have the right to challenge the accuracy or completeness of any private information in your records. If you want to challenge any information, you must write to the City. You may also talk to the individual at the City with whom you are working. Your challenge will be answered with thirty (30) days.
4. You have the right to insert your own explanation of anything you object to in your records. That explanation will be attached anytime the information is shared with another agency. You have the right to appeal decisions made by the City about the accuracy to completeness of your records to the Commissioner of Administration, Data Privacy Act, State of Minnesota, 51 Sherburne Avenue, St. Paul, MN 55155.

If you do not understand this document, or if you have further questions, you should discuss these with the City staff person to whom you provided the statement.

I have read this explanation of my privacy rights and understand the purposes and consequences of giving the information and who is authorized to use it.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## EQUAL OPPORTUNITY EMPLOYMENT AFFIRMATIVE ACTION FORM

Position applied for:

Date:

**This document will be separated from your application before employment consideration by the City of Cottage Grove.** Furnishing the information below is voluntary. The information will in no way affect you as an individual applicant. The information will not be kept in Personnel files and will not be made available to any persons involved in decisions affecting any individual's employment or promotion to a position. The information will be used only for test validation research and reporting on Equal Employment Opportunity and Affirmative Action.

What Race/Ethnic Group Do You Consider Yourself?

- White, not of Hispanic origin – persons having origins in any of the original peoples of Europe, North Africa or the Middle East
- Hispanic, Mexican or Chicano
- African American, not of Hispanic origin – persons having origins in any of the Black racial groups of Africa
- American Indian or Alaskan Native – persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal or community affiliation
- Asian or Pacific Islander – persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Sub-Continent or the Pacific Islands (For example: China, Japan, Korea, the Philippine Islands and Samoa)



## VETERANS PREFERENCE POINTS APPLICATION

Veteran <input type="checkbox"/> Self <input type="checkbox"/> Spouse		If spouse, veteran's name:									
Branch of Service:		Period of Active Duty From: _____ To: _____									
Rank at Discharge:	Type of Discharge:	Date of Final Discharge:	Service No:								
Are you receiving or eligible for a military pension? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have a compensable service-related disability? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Preference requested: <table style="display: inline-table; vertical-align: middle; margin-left: 10px;"> <tr><td style="width: 20px; height: 15px;"><input type="checkbox"/></td><td>Veteran</td></tr> <tr><td style="width: 20px; height: 15px;"><input type="checkbox"/></td><td>Disabled Veteran</td></tr> <tr><td style="width: 20px; height: 15px;"><input type="checkbox"/></td><td>Spouse of Disabled Veteran</td></tr> <tr><td style="width: 20px; height: 15px;"><input type="checkbox"/></td><td>Spouse of Deceased Veteran</td></tr> </table>				<input type="checkbox"/>	Veteran	<input type="checkbox"/>	Disabled Veteran	<input type="checkbox"/>	Spouse of Disabled Veteran	<input type="checkbox"/>	Spouse of Deceased Veteran
<input type="checkbox"/>	Veteran										
<input type="checkbox"/>	Disabled Veteran										
<input type="checkbox"/>	Spouse of Disabled Veteran										
<input type="checkbox"/>	Spouse of Deceased Veteran										

**Preference Points application cannot be considered without supporting documentation (see instructions above). If the documentation is not attached, it must be received in our office no later than seven (7) calendar days after the application deadline for the position in order to guarantee that points are awarded in a timely manner.**

**Supporting documentation:**  is attached  
 will be submitted within 7 days of application deadline.