



MUNICIPAL BUILDING COMMISSION

Application for Employment

The Municipal Building Commission (MBC) is an equal opportunity, affirmative action employer.

APPLICATION INSTRUCTIONS -- PLEASE READ

1. Be sure to include proof of education, licenses, certificates, training, and veteran's eligibility (if required). Originals need not be submitted.
2. Read the Job Announcement carefully, if you are applying for a specific position, to be sure that you meet ALL the requirements.
3. Your application must be filled out completely. Applications that are not complete will not be processed.
4. If a section does not apply to your background, enter "None."
5. Do not state "see resume" when asked to describe your responsibilities and experience. Your qualifications will be evaluated based on information provided on the application only.

RETURN COMPLETED FORM TO: Municipal Building Commission Room 105 City Hall 350 S. 5th Street
Minneapolis, MN 55415-1319 Fax (612) 596-9561

APPLICANT INFORMATION

Last Name (PLEASE PRINT)

First Name

Full Middle Name

Social Security Number:

Would you, in any of your education or experience, be known under another name? ☐ No ☐ Yes If yes, under what name(s) and between what dates:

Current Address

City

State

Zip

Home Phone:

Business Phone:

Other Phone Number (i.e., cellular, etc.):

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Job Title (List all positions for which you would like to be considered.)

Exam Number (List all current, open positions for which you are qualified and would like to be considered.)

Job Title

Exam Number

REFERRAL SOURCE: Where did you learn that this position was open for application? Please check one referral source.

- | | |
|---|--|
| <input type="checkbox"/> City Department or Employee (Which one?) | <input type="checkbox"/> Hotline (612) 673-2489 |
| <input type="checkbox"/> Community Agency (Which one?) | <input type="checkbox"/> Star Tribune Newspaper (not considered a community newspaper) |
| <input type="checkbox"/> Job Service | <input type="checkbox"/> Community Newspaper (which one?) |
| <input type="checkbox"/> Minneapolis Human Resources | <input type="checkbox"/> Radio (Which station?) |
| <input type="checkbox"/> School (Which one?) | <input type="checkbox"/> Television (Which station?) |
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> Internet (Which website?) |

EDUCATION: What is the highest level of education you have completed? Please check one.

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Some High School | <input type="checkbox"/> High School Graduate, GED | <input type="checkbox"/> Some College | <input type="checkbox"/> Technical School |
| <input type="checkbox"/> 2-Year College Degree | <input type="checkbox"/> Bachelor's Degree | <input type="checkbox"/> Master's Degree | <input type="checkbox"/> Some Graduate School |
| <input type="checkbox"/> Doctorate | <input type="checkbox"/> MD, DDS, JD | <input type="checkbox"/> Post Doctorate | |

PREVIOUS EMPLOYMENT: Have you ever been employed by any of these organizations? Please check all that apply.

- | | | |
|--|-------------|-----------|
| <input type="checkbox"/> City Of Minneapolis | Start Date: | End Date: |
| <input type="checkbox"/> Mpls Board of Education | Start Date: | End Date: |
| <input type="checkbox"/> Minneapolis Park Board | Start Date: | End Date: |
| <input type="checkbox"/> Hennepin County | Start Date: | End Date: |

EMPLOYMENT HISTORY

LIST YOUR EMPLOYMENT HISTORY FOR THE LAST 7 YEARS BEGINNING WITH YOUR MOST RECENT EMPLOYMENT.

Do not state "see resume" when asked to describe your responsibilities and experience. Your qualifications will be evaluated based on information provided on the application only.

If you are currently working, may we contact your current employer? ☐ YES ☐ NO

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Current Employer

Start Date

End Date

Address

City

State

Zip

Phone Number

Hours Worked Per Week

Your Job Title

Supervisor

Reason for Leaving

Please provide a brief description of your specific job duties:

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Employer

Start Date

End Date

Address

City

State

Zip

Phone Number

Hours Worked Per Week

Your Job Title

Supervisor

Reason for Leaving

Please provide a brief description of your specific job duties:

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Employer

Start Date

End Date

Address

City

State

Zip

Phone Number

Hours Worked Per Week

Your Job Title

Supervisor

Reason for Leaving

Please provide a brief description of your specific job duties:

EMPLOYMENT HISTORY (continued)

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Employer	Start Date	End Date
Address		
City	State	Zip
Phone Number	Hours Worked Per Week	
Your Job Title	Supervisor	
Reason for Leaving		
Please provide a brief description of your specific job duties:		

Give dates and reasons, excluding disabilities, for any time in the last seven (7) years that is not accounted for in your employment history (e.g. unemployment, education, etc.):

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Have you ever been discharged or asked to resign from any position for misconduct or unsatisfactory service? ☐ YES ☐ NO

If yes, please describe the situation. Use the 'Comments' section of this application if you need more space:

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EDUCATION

Degree	Graduated: Yes <input type="checkbox"/> No <input type="checkbox"/>	If no, year expected to graduate
Major/Course of Study	School	
Degree	Graduated: Yes <input type="checkbox"/> No <input type="checkbox"/>	If no, year expected to graduate
Major/Course of Study	School	
Course Title	School Name	Course Date
Course Title	School Name	Course Date

TRAINING: List any additional training you have received.

Course Title	School Name	Course Date
Major/Course of Study	School Name	Course Date

LICENSES & CERTIFICATES

List applicable licenses or certificates. Include 1) license date, 2) license number, 3) issuing organization, 4) expiration date, 5) state in which it was issued. A legible photocopy is preferred, if it shows all information requested

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PROFESSIONAL MEMBERSHIPS

List any professional organizations to which you belong. Include the organization name and date you joined the organization.

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LANGUAGE SKILLS

If you are multi-lingual, please list the additional language(s) that you are able to translate, speak, read and/or write. (The hiring department may request a test to verify this information)

Language: English

Speak: ☐ High ☐ Moderate ☐ Low

Read ☐ High ☐ Moderate ☐ Low

Write: ☐ High ☐ Moderate ☐ Low

Other Language: _____ Able to Translate to English: ☐ Yes ☐ No

Speak: ☐ High ☐ Moderate ☐ Low

Read: ☐ High ☐ Moderate ☐ Low

Write: ☐ High ☐ Moderate ☐ Low

Other Language: _____ Able to Translate to English: ☐ Yes ☐ No

CONVICTIONS

If you have been convicted of any violations of the law, other than parking tickets, you MUST report ALL convictions, past and present. Do not list juvenile (under 18 years of age) convictions unless you were tried as an adult. If it is determined that they are NOT job related, they will not disqualify you. Applicable positions with the MBC require a background check by the Hennepin County Adult Detention Center/Public Safety Facility and the Minneapolis Police Department.

Month/Day/Year	City/County/State	Nature of Offense	Result (fine paid, time served, length of probation, etc.)

COMMENTS

NOTE - IF YOU NEED SPECIAL TESTING ACCOMMODATIONS (such as a reader or sign language interpreter) PLEASE SPECIFY TYPE OF ACCOMMODATION NEEDED:

IMPORTANT INFORMATION - READ THE FOLLOWING STATEMENTS CAREFULLY AND BE SURE TO SIGN THIS APPLICATION

1. I certify that all the information I have provided on this application is true and complete to the best of my knowledge. I understand that giving false information or omitting requested information could result in rejection of my application or dismissal if I am hired.
2. I authorize the Municipal Building Commission to verify this information to determine whether or not I am qualified for which I am applying.
3. I hereby authorize all current and previous employers to release job-related information upon the request of the Municipal Building Commission.

Signature

Printed Name

Date

DO NOT WRITE IN THIS SECTION - FOR HR USE ONLY

HRIS User Initials

Date Data Entered

RETURN TO:

Municipal Building Commission
Room 105 City Hall, 350 South 5th Street
Minneapolis, MN 55415-1319

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