

## Application for Employment

We welcome you as an applicant for employment with the City of Cambridge. It is the City's policy to provide equal opportunity in employment. The City 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 refer to the Applicant Data Practices Advisory for information regarding what is considered public and private information as an applicant, and if you are selected for the position, as an employee.

The City of Cambridge 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 the City Administrator at 763-689-3211.

### Personal Information

Name:	(Last)	(First)		(MI)
Street Address				
City, State, Zip				
Phone Number			Alternate Phone	
Email				
Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No    Class (e.g. A, B, C, D, provisional, etc.) : _____				
Any endorsements? <input type="checkbox"/> Yes    Type: _____ (e.g. airbrake, motorcycle, trailer, etc.)				
For positions requiring a license, list your State license or certificate number (e.g. POST license, boiler's license, building official's license, water operator, wastewater operator, etc.):				
Type of license: _____			Number: _____	

### 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 which you are applying? <i>Proof of citizenship or work eligibility will be required as a condition of employment.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you at least 18 years old?	<input type="checkbox"/> Yes <input type="checkbox"/> No



List any current licenses, registrations, or certificates you possess which may be related to this position:


Check the box below if you are proficient in the following programs or equipment:

- Microsoft Outlook       Microsoft Word       Microsoft Excel       Civic Systems   
 Arcview GIS       Adobe Illustrator       Microsoft Access       Ipad or Tablet

## Employment Experience

List present or most recent employer first. **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. [NOTE: Cities should decide on a finite period of time to ask for in terms of work history, something on the order of 5-10 years of relevant experience is recommended. Cities should consult with legal counsel on the duration of work experience requested.]

Company	Name of last supervisor	Hours Per Week
Address	Start Date	Phone Number
City, State, Zip	End Date	Last Job Title
Reason for leaving (be specific):		
Describe your work in this job:		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Company	Name of last supervisor	Hours Per Week
Address	Start Date	Phone #:
City, State, Zip	End Date	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	Hours Per Week
Address	Start Date	Phone #:
City, State, Zip	End Date	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	Hours Per Week
Address	Start Date	Phone #:
City, State, Zip	End Date	Job Title:

Reason for leaving (be specific):

Describe your work in this job:

May we contact this employer? Yes No

### Unsalaries Experience

Describe any unsalaried or volunteer experience relevant to the position for which you are applying (you may exclude, if you wish, information which would reveal race, sex, religion, age, disability, or other protected status).

## Military Experience

Did you serve in the U.S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No
Describe your duties:
Do you wish to apply for Veterans' Preference points: <input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered "yes," you must complete the enclosed application for Veterans' Preference points, and submit the application and required documentation to the City by the application deadline of the position for which you are applying.

Please provide three personal references (Do not list relatives)

1. _____	_____	_____
Name	Occupation	Telephone
2. _____	_____	_____
Name	Occupation	Telephone
3. _____	_____	_____
Name	Occupation	Telephone

## Authorization

I certify that all information I have provided 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 or omission is discovered.

I acknowledge that I have received a copy of the job description summary for the position/s for which I am applying. I further acknowledge my understanding that employment with the City of Cambridge is "at will," and that employment may be terminated by either the City or me at any time, with or without notice.

With my signature below, I am providing the City of Cambridge authorization to verify all information I provided within this application packet, including contacting current or previous employers. However, 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 employer will not be made without my specific authorization.

I further understand that criminal history checks, financial background check, and pre-employment physical may be conducted after I have been offered employment and that a conviction of a crime related to this position may result in my being rejected for this job opening. I also understand it is my responsibility to notify the City of Cambridge in writing of any changes to information reported in this application for employment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Veterans' Preference

COMPLETE THIS FORM ONLY IF YOU ARE CLAIMING VETERANS' PREFERENCE

NOTE: COPY OF "MEMBER COPY 4" VETERAN'S DD214, OR OTHER DOCUMENTATION VERIFYING SERVICE, MUST BE ATTACHED  
(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 City of Cambridge 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

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, or have active military service certified under 38 U.S.C. § 106, 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 City of Cambridge.

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)	(MI)	Position For Which You Applied		
			Closing Date:		
Address (Street)	(City)	(State)	(Zip)	Phone Number	Are you a US Citizen or Resident Alien?
					<input type="checkbox"/> YES <input type="checkbox"/> NO

**VETERAN (10 points)** ("Member Copy 4" of DD214 or DD215, or other documentation verifying service, must be submitted to receive points):

Honorably discharged veteran       Yes       No

**DISABLED VETERAN (15 points)** ("Member Copy 4" of DD214, or other documentation verifying service, and USDVA letter of a compensable disability rating decision must be submitted to receive points):

Percent of Disability: \_\_\_\_\_%      Have you ever been promoted within the City of Cambridge for employment?       Yes       No

**SPOUSE OF DECEASED VETERAN (10 points or 15 if the veteran was disabled at time of death):**

("Member Copy 4" of DD214 or DD215, or other documentation verifying service, photocopy of marriage certificate, spouse's death must be submitted to receive points. You are ineligible to receive points if you have remarried or were divorced from the veteran).

Date of Death: \_\_\_\_\_      Have you remarried?       Yes       No

**SPOUSE OF DISABLED VETERAN (15 points):**

("Member Copy 4" of DD214 or DD215, or other documentation verifying service, and USDVA letter of a compensable service connected disability rating decision must be submitted to receive points).

How does Veteran's disability prevent performance of a stated job "requirement" due to the veteran's service-connected disability the veteran is unable to qualify for this position because (be specific):


**AFFIDAVIT:** I hereby claim Veterans' Preference points for this examination and swear/affirm that the information given is true,

complete and correct to the best of my knowledge. I hereby acknowledge that I am responsible to obtain the required Veterans' Preference verification documents and submit them to the City of Cambridge by the required application deadline.

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Signature

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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 (38 U.S.C. § 106)

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. Generally, 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 if it was incurred prior to September 7, 1980.
- 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, 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 City of Cambridge. Please contact our office at 763-689-3211 or your local County Veterans' Service Office, if you have any questions regarding veterans' preference.