

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

**Arrowhead Regional Corrections
Civil Service/Personnel Department**

100 N. 5th Ave. W., #1
Duluth, MN 55802-1284
(218) 726-2422 (Voice)
(218) 725-5198 (TDD)
(218) 725-5065 (Employment Hotline)
www.co.st-louis.mn.us



Your Social Security Number

□ □ □ - □ □ - □ □ □ □

Your Test Site Preference

Duluth Virginia/Hibbing

Note: Test may be limited to one site only; refer to the Position Announcement for examination information

Your Name: _____
Position Applying For: _____
Position Code: _____

PRINT Clearly or Type

Last Name		First Name		Middle Initial	May we call you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Street Address				Home Phone () ()		Work Phone () ()
City	State	Zip Code		Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you a current employee of ARC? <input type="checkbox"/> Yes <input type="checkbox"/> No

Are you a United States Citizen or have permission to work in the U.S.? Yes No Email Address: _____

FORMAL EDUCATION

Did you graduate from High School/receive G.E.D.? Yes No Circle last grade of secondary school completed: 6 7 8 9 10 11 12

College, University, or Professional School (List all undergraduate and graduate work) <i>Attach copies of related transcripts if requested</i>		Dates of Attendance Month and Year		Number of Credits		Degree		Major and Minor Subjects
						Type AA, BS, MBA, etc	Date Rec'd or anticipated	
Name	Location	From	To	Quarter	Semester			

Business, Correspondence, Trade, Technical or Vocational School <i>Attach copies of related transcripts if requested</i>		Dates of Attendance Month and Year		Full Time	Part Time Hrs/Wk	Certificate Received? Yes or No	Percent of coursework completed	Program Title
Name	Location	From	To					

OCCUPATIONAL LICENSE

If position requires certificate, registration, occupational or driver's license, please provide the following information **and attach copies**:

Type: _____ Number: _____ Expiration Date: _____

VETERAN'S PREFERENCE

Are you applying for Veteran's Preference Points? Yes No If "Yes", please see page 3 of employment application.

APPLICANT SIGNATURE

ATTENTION - THIS STATEMENT MUST BE SIGNED. ANY FALSE STATEMENT ON THIS APPLICATION IS PUNISHABLE BY LAW.
Read the following statements carefully before you sign this employment application.

I hereby authorize Arrowhead Regional Corrections and any agent acting on its behalf to conduct an inquiry into any job related information contained in this application, including but not limited to, my records maintained by an educational institution relating to academic performance. I hereby authorize all current and previous employers (unless noted otherwise on this form) to release any information in their files pertaining to my employment history, including but not limited to, the nature of my employment, wages, attendance records, performance reviews and disciplinary actions.

I certify that all of the statements by me in this application are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that any false information or omission of information from this application may be cause for rejection or dismissal if employed. I have read the Tennessee Warning (page 4) and agree to supply the information on this form with full knowledge of that warning.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

FOR OFFICE USE ONLY: ___ AA ___ NQ ___ MD ___ SA REASON: _____

WORK EXPERIENCE

Provide a complete description of all qualifying experience, paid and/or volunteer, starting with the most recent position held. (Please refer to instructions on page 4)

May we contact your present employer? Yes No May we contact former employers? Yes No

LENGTH OF EMPLOYMENT

Organization: _____ Telephone (____) _____ Address: _____ Position Title: _____ Supervisor: _____ Major Activities: 1. _____ 2. _____ 3. _____ 4. _____ 5. _____ Number and Title(s) of people you supervised: _____ Reason for leaving: _____	% of time _____ _____ _____ _____ _____	From: _____ Month / Year To: _____ Month / Year Total: _____ Years - Months Hrs./Week: _____ <i>(If hours vary, indicate average per week)</i>
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ATTACH ADDITIONAL SHEETS IF NECESSARY. BE SURE TO INCLUDE ALL INFORMATION REQUESTED ABOVE.

AVAILABILITY INFORMATION

To efficiently fill each position vacancy, we must know the conditions under which you will accept employment with Arrowhead Regional Corrections. Failure to accept an interview or a job offer under the conditions you give below will result in removal from the eligible register.

I am available to begin work on: _____

- I will accept Full-Time employment
 I will accept Part-Time employment
 I will accept Temporary employment
 I will accept On-Call employment

I will accept employment at the following locations:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Duluth Area | <input type="checkbox"/> Virginia Area |
| <input type="checkbox"/> AJC | <input type="checkbox"/> Hibbing area |
| <input type="checkbox"/> NERCC | <input type="checkbox"/> Inth'l Falls Area |
| <input type="checkbox"/> Carlton area | <input type="checkbox"/> Other |

Are you available for shift work?

- Yes No

Have you ever been convicted for a violation other than a minor traffic offense?

- Yes No

If yes, provide details (including date(s) and jurisdiction(s) involved) on a separate sheet and attach. You must report all convictions. If determined to be "not job related", they will not disqualify you.

FOR ARC
EMPLOYEES ONLY

Are you applying promotionally?

- Yes No

APPLICANT: PLEASE READ CAREFULLY. The information requested below will be used to meet federal reporting requirements pertaining to equal employment opportunity and to determine the effectiveness of our recruitment efforts and our Affirmative Action Program. Furnishing the information below is voluntary. It will not be kept in personnel files and will not be given to anyone making hiring decisions. We would appreciate your assistance in our efforts to provide equal opportunity in employment.

NAME:

POSITION APPLIED FOR:

HOW DID YOU LEARN ABOUT THIS JOB? (Please mark one only)

- ARC Announcement Employment Hotline College/Tech School Other _____
 Walk In Newspaper Inter/Intra Net
 ARC Employee Employment Agency Job Fair

GENDER?

- Male Female

RACE/ETHNIC GROUP? (Please mark one only)

- CAUCASIAN - (Not of Hispanic origin), includes persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
 BLACK OR AFRICAN AMERICAN - All persons having origins in any of the Black African racial groups; not of Hispanic origin.
 HISPANIC OR LATINO - Persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
 AMERICAN INDIAN OR ALASKAN NATIVE - All persons having origins in any of the original peoples of North America.
 ASIAN OR PACIFIC ISLANDER - All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands.

DISABILITY STATUS:

A person with a disability is defined as:

1. Having a physical or mental impairment which substantially limits one or more major life activities.*
2. Having a record of such an impairment.
3. Being regarded as having such an impairment.

**Major life activities include caring for oneself, performing manual tasks, walking, talking, hearing, seeing, speaking, breathing, learning and working.*

Note: Temporary, non-chronic impairment of short duration, with little or no long-term impact, are usually not disabilities. A visual problem which has been corrected by glasses is usually not a disability. Veterans who are rated as "disabled" by the Veterans Administration are not automatically "disabled" under this definition.

Based on the above information, do you claim disability status?

- Yes No

Do you have special needs which may necessitate accommodations in the test facilities or test process?

- Yes No

Please describe the type of accommodation needed: _____

Job accommodations will be considered on a case-by-case basis.

Accommodations will be based on the essential job function identified for the vacant position.

CLAIMS FOR VETERANS PREFERENCE (VETERANS ONLY)

If you are eligible to apply for Veterans Preference, attach a copy of documents listed for the line marked:

- Veterans: DD214 (Not eligible for VP if receiving a military retirement annuity based on years of service)
 Disabled Veterans: DD214 & compensable disability award letter within the last 6 months.
 Spouse Disabled: DD214 & compensable disability award letter (6 months) & marriage certificate**.
 Spouse of Deceased Veteran: DD214, Marriage Certificate and Death Certificate.

*** (Eligible only if Veteran is unable to qualify because of the disability.)*

INSTRUCTIONS FOR COMPLETING APPLICATION FORM

If you do not provide complete information, you may receive an inaccurate score or be removed from further consideration. So that your application will be processed accurately, please do the following:

1. **Fill out a separate application form for each exam.**
Photocopies are acceptable. Sign and date your application on page one.
 - Part-time work experience is prorated to the number of hours worked, using a 40-hour work week as the standard for full-time work.

2. **Work Experience Section:** For jobs with an experience and training rating, your score will be determined by an evaluation of the job related experience and training you describe on the application. (Only that experience occurring during the ten most recent years will be used in determining this rating. However, experience beyond ten years may be included on the application for purposes of meeting minimum qualifications. Be specific and complete.
 - To receive proper credit, list the five most important and/or time-consuming duties and the percentage of time spent on each for each position. Do not include unimportant job duties which are performed only occasionally.
 - Do not write "see prior applications".

3. Your application and supporting material becomes the property of Arrowhead Regional Corrections and cannot be returned. Work samples, letters of recommendation and the like should not be submitted with the application. However, you may bring such material to an actual employment interview.

4. The only adjustments you may make on your application after the closing date for filing is your name, address, telephone number or availability information.
 - List your present or most recent experience first, including all job-related volunteer and/or unpaid experience.
 - List each promotion as a separate job, even though it may have been with the same department or organization.
 - If you attach additional information sheet(s), include all of the information requested on the application, i.e., organization, position title, length of employment, total time, hours per week, major activities and percentages. If hours per week vary, please use the average number of hours per week.
 - Resumés are only accepted if they are required per the job announcement. If resumés are required, please do not submit personal information, i.e., birthdate, marital status, activities, etc. This information will automatically be removed from your resumé.

TENNESSEN WARNING

This application is to assist in the process of referring you to Arrowhead Regional Corrections for possible employment. Certain information requested on the application is private, that is, it may be released only to you or to Arrowhead Regional Corrections where you may be considered for employment. Names of applicants become public when certified as eligible for appointment to a vacancy or when the applicant is considered by the appointing authority to be a finalist for a position.

Private Data	Why we ask for it	Are you legally obligated to provide it	What may happen if you don't provide it?
Name	To distinguish you from all other applicants.	Yes	Failure to provide information may be cause for rejecting an application.
Social Security Number	To distinguish you from all other applicants and to make processing more efficient.	No	You will be assigned an individual identification number which must be used in any contacts you have with this department concerning your examination records.
Street Address Route or Box No.	To be able to send you notices.	Yes	Failure to provide information may be cause for rejecting an application.
Telephone Numbers	To be able to contact you to determine availability for interview.	No	We may not be able to employ you in certain jobs where you may be required to come to work on short notice.
Racial/Ethnic, Handicap/Disability status	To be able to make Equal Opportunity reports.	No	We will not be able to accurately assess our recruitment efforts as an affirmative action employer.
Conviction Records	To determine whether we may legally accept an application from you and to determine whether your record may be a job related conviction.	Yes	We will not be able to make determinations required by law.
Special Testing	To determine whether you need special testing arrangements.	No	We will not be able to provide you necessary testing arrangements in a timely manner.

ALL OTHER INFORMATION ON THE APPLICATION FORM IS PUBLIC, THAT IS, IT MAY BE GIVEN TO ANYONE FOR ANY PURPOSE