



CITY OF HAM LAKE

15544 Central Avenue NE
Ham Lake, Minnesota 55304
(763) 434-9555
info@hamlakemn.gov

CITY OF HAM LAKE PUBLIC WORKS MAINTENANCE WORKER

The City of Ham Lake is accepting applications for a full-time Public Works Department worker. This position will perform a variety of duties involving the maintenance and repair of city streets, parks, roadway signs, storm water pipes, snow removal, and other duties as assigned. Applicants must have a high school diploma or GED, a valid Minnesota Class B (CDL) Driver's License is required, with the ability to obtain a Class A (CDL) License along with air brake and tanker endorsements, and at least 6 months experience in the operation and maintenance of light and heavy equipment, blacktop repair, and turf maintenance. All offers will be contingent upon successful completion of a background and licenses check as well as drug testing. This full-time position has a salary range of \$25.85/hr. to \$32.31/hr.

The required City Application and Supplemental Questionnaire as well as job description are available online at www.hamlakemn.gov or at Ham Lake City Hall.

Application deadline: The position will be open until the best match is found.

Required applications and supplemental questionnaires can be submitted in a sealed envelope at City Hall or by mail at:

City of Ham Lake
15544 Central Ave. NE
Ham Lake, MN 55304
Attn: Andrea Murff, Finance/HR Director

Or by email to Andrea Murff, Finance/HR Director at amurff@hamlakemn.gov



CITY OF HAM LAKE EMPLOYMENT APPLICATION

◆ 15544 CENTRAL AVENUE NE, HAM LAKE, MINNESOTA 55304 ◆ WEBSITE: WWW.HAMLAKEMN.GOV
◆ OFFICE: (763) 434-9555 ◆ FAX: (763) 434-9599 ◆ EMAIL: INFO@HAMLAKEMN.GOV

**APPLICATION MUST BE FILLED OUT
COMPLETELY**

OFFICE USE ONLY
DATE RECEIVED:
(Date Stamp)

Title of Position Applying For

Date Available to Start

Today's Date

Employment Status Desired: _____ Full-Time _____ Part-Time _____ Seasonal _____ Temporary

Last Name

First Name

Middle Name

Street Address

City

State

Zip Code

Email Address

Home Phone: (_____) _____ - _____

Work Phone: (_____) _____ - _____

Cell Phone: (_____) _____ - _____

Are you a United States Citizen or legally eligible to work in the U.S.? ☐ Yes ☐ No

(If hired, you will be required to provide documentation that you are eligible to work in the U.S.)

Are you 18 years or older? ☐ Yes ☐ No

Are you willing to work overtime? ☐ Yes ☐ No

Have you been previously employed by the City of Ham Lake? ☐ Yes ☐ No If yes, list date(s) and positions(s) held:

Do you have any relatives working for the City of Ham Lake? ☐ Yes ☐ No If yes, list names and relationship to you:

Did you graduate from high school or receive a GED? ☐ Yes ☐ No

EDUCATION

SCHOOL	NAME AND LOCATION	NUMBER OF YEARS COMPLETED	DEGREE, MAJOR OR TYPE OF COURSE
High School			
College			
Graduate School			
Trade, Business, Night or Correspondence			
Other			

EMPLOYMENT HISTORY*Please list current employment first*

Name of Employer			
Street Address		City	State Zip
Telephone Number (Include Area Code) () -		Supervisor's Name	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Your Job Title	Employed FROM: (mo. /yr.) TO: (mo. /yr.)		
Duties			
Reason for Leaving or seeking other employment:			

Name of Employer			
Street Address		City	State Zip
Telephone Number (Include Area Code) () -		Supervisor's Name	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Your Job Title	Employed FROM: (mo. /yr.) TO: (mo. /yr.)		
Duties			
Reason for Leaving or seeking other employment:			

Name of Employer			
Street Address		City	State Zip
Telephone Number (Include Area Code) () -		Supervisor's Name	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Your Job Title	Employed FROM: (mo. /yr.) TO: (mo. /yr.)		
Duties			
Reason for Leaving or seeking other employment:			

Name of Employer			
Street Address		City	State Zip
Telephone Number (Include Area Code) () -		Supervisor's Name	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Your Job Title	Employed FROM: (mo. /yr.) TO: (mo. /yr.)		
Duties			
Reason for Leaving or seeking other employment:			

KNOWLEDGE, SKILLS AND ABILITIES		
Typing Ability: <input type="checkbox"/> Yes <input type="checkbox"/> No WPM: _____	Speedwriting Ability: <input type="checkbox"/> Yes <input type="checkbox"/> No WPM: _____	Dictation Experience: <input type="checkbox"/> Yes <input type="checkbox"/> No
Computer Experience: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list computer software programs and hardware you are skilled with:		
List other office equipment you can operate:		
List any special courses, seminars, workshops and/or training you attended that relate to the job you are applying for:		
If relevant, list other registrations, licenses or certificates you have:		
Type: _____ Date Issued: _____ Date Expires: _____		
Type: _____ Date Issued: _____ Date Expires: _____		
For Labor & Skilled Trades Only List the equipment you are capable of operating:		
This space can be used to add any additional information you deem relevant to better assess your suitability for the position applied for:		

VETERAN'S PREFERENCE
<p>VETERAN'S PREFERENCE POINTS: The City of Ham Lake operates under a point preference system which awards points to qualified veterans and spouses of disabled or deceased veterans to add to their application results, subject to the provisions of M.S. 43A.11. Complete this section only if you are claiming Veterans preference. Ten (10) points are granted to non-disabled veterans on open competitive examinations; fifteen (15) points are added if the veteran has a service connected compensable disability as certified by the U.S. Dept. of Veterans Affairs. Veteran is defined by M.S. 197.447. A copy of the Veterans DD214 MUST be attached. Claims not accompanied by proper documentation will not be processed. For assistance in obtaining a copy of DD214, please contact the MN Dept. of Veterans Affairs at 651-556-0596.</p> <p>To qualify for preferences, 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 federal active duty or as a result of active duty, and by the spouse of a disabled veteran who is unable to qualify because of the disability.</p> <p><i>NOTE: Veterans MUST supply a copy of their DD214. Disabled veterans must also supply form FL-802 or an equivalent letter from a Service Retirement Board. Spouses applying for preference points must supply their marriage certificate, the Veteran DD214 and FL-802 or death certificate.</i></p>
<p>ARE YOU APPLYING FOR VETERAN'S PREFERENCE? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>PREFERENCE REQUESTED: _____ Veteran (10 pts.) _____ Disabled Veteran (15 pts.) _____ Spouse of Disabled Veteran or _____ Deceased Veteran (10 or 15 pts.)</p>
<p>Do you have a service-related disability? <input type="checkbox"/> Yes <input type="checkbox"/> No (_____ %)</p>

REFERENCES			
<p>REFERENCES: Please list three (3) references (not relatives), who have known you for at least one (1) year, who can attest to your work qualities.</p>			
Name	Relationship to You	Occupation	Telephone Number

NOTICE TO APPLICANT

Information requested on your application that is defined by Minnesota Statute as public may be released on request and includes job history, education and training, relevant test scores, rank on our eligibility list, Veteran's status, and work availability. Your name is private until you are certified as eligible for appointment to a position or are considered by the appointing authority to be a finalist for a position in public employment. Certain other information is private and may be released only to you or to governmental entities authorized access by law.

NAME: Used to identify you in relation to other applicants. You are legally required to provide your name. Failure to provide this information may result in a delay in processing or rejection of your application.

LICENSE INFORMATION: Used to certify applicants for positions where State law requires appropriate license. You are legally required to provide this information. Failure to provide this information may result in rejection of your application.

CITIZENSHIP STATUS: Used to certify applicants for work in the U.S. as determined by laws of the U.S. Department of Labor and the State of Minnesota. Failure to provide this information may result in rejection of your application.

CRIMINAL HISTORY BACKGROUND CHECKS: The City of Ham Lake conducts criminal history background checks on all regular or temporary full-time or part-time employees. For sworn police positions, felony convictions (and certain other convictions mandated by the state licensing board for police) will automatically disqualify you from further consideration. For non-police positions, the City of Ham Lake will look at the type of conviction and whether it is directly related to the job for which you are applying. Candidates for positions working with children will not be selected if they have been convicted of any crime listed in the Child Protection Worker Act (M.S. 299C.61 & 62). Generally, this includes child abuse crimes, murder, manslaughter, felony level assault or any assault crime committed against a minor, kidnapping, arson, criminal sexual conduct, and prostitution-related crimes. Before any applicant (other than applicants for positions within the police or fire department or for emergency medical services positions) is rejected on the basis of criminal conviction, he or she will be notified in writing and will be given any rights afforded by M.S. Chapter 364. This includes the right to show evidence of rehabilitation.

Minnesota Statute Section 518.6111, requires employers to obtain information from all new employees regarding court-ordered child support obligations that are required by law to be withheld from income. If hired, you will be required to provide such documentation. Failure to provide said documentation will result in dismissal.

In accordance with the Immigration Reform and Control Act of 1986, the City of Ham Lake hires only U.S. citizens and lawfully authorized alien workers. If hired, you will be required to provide written documentation of citizenship or legalized alien program. Failure to provide said documentation will result in dismissal.

Employees and job applicants are subject to drug and alcohol testing in conjunction with the provisions of Minnesota Statutes, Section 181.950, and the provisions as listed in Administrative Policy No. 3.14, Subd. 2. Copies of this policy are available for inspection during regular business hours by employees or job applicants in the Human Resources Department.

If you are hired for this position, you may be required to undergo a physical examination at the employer's expense to determine whether or not you are able to perform the duties of this position in an effective and safe manner, and whether or not accommodations are necessary for you.

APPLICANT'S STATEMENT

I certify that I have read the "Notice to Applicant" regarding the Minnesota Data Practices Act, and understand my rights as a subject of data. I authorize that a transcript may be requested where necessary to verify any education record. I hereby expressly authorize the collection, use and release of any and all information concerning me, which relates to my employment. I hereby release the City of Ham Lake, with which I am seeking employment, from any liability which may result from releasing information requested. I also expressly authorize the release by my present and past employers, including its agents/employees of any and all information concerning my employment with them, in any form, oral or written, and I agree to hold harmless my present and past employers from any liability whatsoever arising out of its release of information pursuant to this release.

I acknowledge I have read and understand the job announcement for the position of which I am applying. I further acknowledge my understanding that employment with the City of Ham Lake is "at will" and that employment may be terminated by either the City of Ham Lake or me at any time, with or without notice. I understand that, if hired, I am obliged to comply with any and all current and subsequently adopted City of Ham Lake policies.

I understand that if offered a position, I may be required to submit to and pass a drug screen and depending on the position, may be required to submit to and pass a psychological examination, a physical examination and/or a physical agility test.

I certify that all information I have provided in this application (and accompanying resume, if any) and during any interview for employment is true and complete. I authorize investigation of all statements contained in this application for employment with the City of Ham Lake as may be necessary in arriving at an employment decision. I agree and understand that any false or misleading statements or omission of information contained in this application or any supplemental materials I submit will be grounds for disqualification from employment, or in the event of employment, dismissal of employment upon discovery of the information at a later date.

By signing this form I hereby acknowledge I have read and understand the above statements. ***Failure to sign this form may result in rejection of your application.***

Signature of Applicant

Date

The City of Ham Lake considers applicants for all positions without regard to race, age, religion, national origin, sex, marital or veteran status, disability, sexual preference, status with regard to public assistance, or any other basis protected by law. EOE/ADA

**Streets/Parks Maintenance Worker
Supplemental Questionnaire**

1. Do you have a High School Diploma or GED?

YES NO

2. Do you possess a Valid Class B (CDL) driver's license, with the ability to obtain a Class A (CDL) License along with air brake and tanker endorsements?

YES NO

3. Do you at least 6 months of experience in the operation and maintenance of light and heavy equipment, blacktop repair, or turf maintenance?

YES NO

4. Previous select the number of years of experience operating heavy equipment:

6 mon. to 1 year

2 years to 3 years

4 years to 5 years

6+ years

5. Previous select the number of years of experience snowplowing with heavy equipment/trucks:

6 mon. to 1 year

2 years to 3 years

4 years to 5 years

6+ years

6. Previous select the number of years of experience operating vehicles requiring Class B/Class A License:

6 mon. to 1 year

2 years to 3 years

4 years to 5 years

6+ years

7. Previous select the number of years of experience working in a municipal public works department

6 mon. to 1 year

2 years to 3 years

4 years to 5 years

6+ years