



Minneapolis Park & Recreation Board

Effective Date: 7/21/2021
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Temporary Employment Application

Temporary Employment Application (uncertified)

Please type or print in ink. Hiring Manager Must Complete gray section below before posting application.

Job Title: _____ Start Date: _____
Location: _____ Department: _____

APPLICANT INFORMATION

Applicant's Name: _____ Phone: _____
Address: _____ Email: _____
City: _____ State: _____ Zip: _____ Desired Location(s): _____

AVAILABILITY

Number of hours per week: _____ per day: _____ Date available to work: _____
Days Available: []Sun []Mon []Tues []Weds []Thurs []Fri []Sat Availability: []Morning []Afternoon []Evening

BACKGROUND (attach additional sheets if necessary)

Please describe previous experience relating to the position for which you are applying:

Describe all training or education you have received relating to the position for which you are applying:

Indicate skill or interests you have which qualify you for other MPRB positions:

PREVIOUS EXPERIENCE WITH THE MINNEAPOLIS PARK & RECREATION BOARD

Have you ever been employed by the MPRB? [] Yes [] No

If yes, please give the following information: Park (or department): _____

Immediate Supervisor: _____ Dates: from _____ to _____

EDUCATION HISTORY

Table with 4 columns: Years Completed, Name of School, Degree, Major/Minor. Rows for High School, College, and Grad School.

Additional Education and Training: (including Colleges, Universities, Trade, Vocational, or other schools attended)

VOLUNTEER EXPERIENCE (attach additional sheets if necessary)

Agency/organization name: _____ Address: _____

Supervisor Name: _____ Phone: _____

Job Title: _____ Dates: from _____ to _____

Reason for leaving: _____ May we contact this agency: [] Yes [] No

Description of duties: _____



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EMPLOYMENT HISTORY (most recent first)

1 - Employer Name: _____ Address: _____
Supervisor Name: _____ Phone: _____
Job Title: _____ Dates: from _____ to _____
Reason for leaving: _____ May we contact this agency: Yes No
Description of duties: _____

2 - Employer Name: _____ Address: _____
Supervisor Name: _____ Phone: _____
Job Title: _____ Dates: from _____ to _____
Reason for leaving: _____ May we contact this agency: Yes No
Description of duties: _____

3 - Employer Name: _____ Address: _____
Supervisor Name: _____ Phone: _____
Job Title: _____ Dates: from _____ to _____
Reason for leaving: _____ May we contact this agency: Yes No
Description of duties: _____

AUTORIZATION DECLARATION

Some of the data which is requested as part of the application process is classified as public data, and some of the data is classified as private data on you. You are not required to provide the requested data. However, if you choose to withhold requested data we cannot consider you for employment. If you do provide the data, your application will be considered, and if you are employed, the information you have given us as an applicant will become part of your personnel record. Anything not classified as public which is placed in your personnel record is made by statute private information, and will not be shared with anyone but those members of our staff and appointing authorities, legal counsel, and other designees who need it, or as otherwise provided by law.

Minnesota Statute §256.998 (<http://www.revisor.leg.state.mn.us/stats/256/998.html>) requires us to report your name, address, social security number and date of birth to the MN Dept. of Human Services within twenty days of your hire date.

My signature below certifies that every statement I have made in this application is true and complete to the best of my knowledge. I understand that any false or incomplete answer may be grounds for not employing me or for dismissing me after I begin work. I understand that I will have to produce documentation verifying identity and employment eligibility in the U.S. I understand that I may be required to verify any and all information given on this application. I understand that this completed application is the property of Minneapolis Park and Recreation Board and will not be returned. I understand the Minneapolis Park and Recreation Board may contact prior employers and other references. I understand that I must notify the Human Resources Department of any changes in my name, address, or phone number.

Applicant's Signature: _____ **Date:** _____

REFERENCES

1 - Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip: _____
Relationship: _____ Number of years known: _____
2 - Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip: _____
Relationship: _____ Number of years known: _____

RETURN APPLICATION TO: MPRB (department listed on pg. 1) Department | 2117 West River Road | Minneapolis, MN 55411
