



**City of Osseo**  
**Public Works Department**  
 415 Central Avenue  
 Osseo, MN 55369-1195  
**P 763.425.2624 F 763.425.1111**

## **WINTER 2018-2019 RINK ATTENDANT** **APPLICATION SUPPLEMENT**

Submit this supplement alongside your APPLICATION FOR EMPLOYMENT.

The outdoor rinks are available as weather allows, usually beginning in late December and continuing through February or March. **During those months, are you generally available for shifts on the following days and times?**

<i>Days</i>	<i>Shifts</i>	<i>Are you available? Please circle one.</i>			<i>Notes / Comments</i>
Mondays	4:00 – 8:00 pm	Yes	No	Unsure	
Tuesdays	4:00 – 8:00 pm	Yes	No	Unsure	
Wednesdays	4:00 – 8:00 pm	Yes	No	Unsure	
Thursdays	4:00 – 8:00 pm	Yes	No	Unsure	
Fridays	4:00 – 10:00 pm	Yes	No	Unsure	
Saturdays	10:00 am – 4:00 pm	Yes	No	Unsure	
	4:00 pm – 10:00 pm	Yes	No	Unsure	
Sundays	12:00 noon – 4:00 pm	Yes	No	Unsure	
	4:00 pm – 8:00 pm	Yes	No	Unsure	

Name: \_\_\_\_\_

Best way to contact you on short notice: \_\_\_\_\_

Why are you interested in the Osseo rink attendant position?

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Please describe your experiences with customer service and/or interacting with members of the public:

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[www.DiscoverOsseo.com](http://www.DiscoverOsseo.com)

## APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

### PLEASE PRINT

Position applied for:		Date of application:	
Last Name:	First Name:	Middle Name:	
Address:	City:	State:	Zip Code:
Telephone Number(s): Home _____ Work _____ Cell _____ ***Please circle the phone number you prefer we use to contact you			

Have you ever filed an application with us before? ☐ Yes ☐ No If Yes, give date: \_\_\_\_\_

Have you ever been employed with us before? ☐ Yes ☐ No If Yes, give date: \_\_\_\_\_

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

☐ Yes ☐ No (Proof of citizenship or immigration status will be required upon employment.)

Have you been convicted of a felony within the last 7 years? ☐ Yes ☐ No

Conviction will not necessarily disqualify an applicant from employment.

If yes, explain: \_\_\_\_\_

### Education

	Name / Address of School	Course of Study	No. Years Completed	Diploma/Degree
High School				
Undergraduate College				
Trade or Business School				
Other (Specify)				

## Work Experience

Start with your present or most recent employment.

Employer:	Address:		
Telephone No.:	Job Title:	Supervisor:	
Dates Employed: From:	To:	Hours of Employment:	
Work Performed:			
Reason for Leaving:			

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Telephone No.:	Job Title:	Supervisor:	
Dates Employed: From:	To:	Hours of Employment:	
Work Performed:			
Reason for Leaving:			

## Personal/Professional References

1.	_____	_____	_____
	Name	Address	Telephone Number
2.	_____	_____	_____
	Name	Address	Telephone Number
3.	_____	_____	_____
	Name	Address	Telephone Number

## Additional Information

State or attach any additional information that you feel may be helpful to us in considering your application:

## Applicant's Statement

<p>I certify that answers given herein are true and complete to the best of my knowledge.</p> <p>I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.</p> <p>This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.</p> <p>I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "<i>at will</i>" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "<i>at will</i>" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.</p> <p>In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.</p>	
_____ Signature of Applicant	_____ Date