



The Minnesota Government Data Practices Act (Minnesota Statutes 13.001-13.99) has two sections that affect applicants seeking employment or volunteering with the City of Red Wing.

First, under “Rights of Subjects of Data,” (MN 13.04) an individual asked to supply private or confidential data concerning the individual shall be informed of:

- The purpose and intended use of the requested data;
- Whether you may refuse or are legally required to supply the requested data;
- Any known consequence arising from your supplying or refusing to supply private or confidential data; and
- The identity of other persons or entities authorized by State or Federal Law to receive the data.

Second, under “Personnel Data” (MN Statute 13.43) the following personnel data on current and former applicants for employment by a government entity is public:

- Veterans status
- Education and training
- Rank on eligibility list
- job history
- relevant test scores
- Work availability

As an applicant, applicant’s names are considered private data until certified as eligible for appointment to a vacancy or when applicants are considered by the appointing authority to be finalists for a position in public employment.

The following personnel data on current and former employees, volunteers, and independent contractors of a government entity is public:

- Name; including employee I.D. number, which must not be the employee’s Social Security number.
- Actual gross salary; including salary range, contract fees, and actual gross pension.
- The value and nature of employer paid fringe benefits and the basis for and the amount of any added remuneration, including expense reimbursement, in addition to salary.
- Job title and bargaining unit; including job description, education, and training background.
- Previous work experience.
- Date of first and last employment.
- The existence and status of any complaints or charges against the employee, regardless of whether the complaint or charge resulted in a disciplinary action.
- The final disposition of any disciplinary action together with the specific reasons for the action and data documenting the basis of the action, excluding data that would identify confidential sources who are employees of the public body.
- The terms of any agreement settling any dispute arising out of an employment relationship, including a buyout agreement as defined in section 123B.143, subdivision 2, paragraph (a); except that the agreement must include specific reasons for the agreement if it involves the payment of more than \$10,000 of public money.

- Work location; including work telephone number; badge number, and honors and awards received.
- Payroll time sheets or other comparable data that are only used to account for employee's work time for payroll purposes, except to the extent that release of time sheet data would reveal the employee's reasons for the use of sick or other medical leave or other not public data.

All other personnel data is private data on individuals but may be released pursuant to a court order. Data pertaining to an employee's dependents are private data on individuals. This private data will be available to you and to those members of City of Red Wing staff needing it to process city records.



MISSION OF THE CITY OF RED WING VOLUNTEER PROGRAM

The mission of the program is the delivery of volunteer assisted City Services to improve the quality of life of City of Red Wing residents that are not possible within the usual resource constraints.

CITY OF RED WING VOLUNTEER APPLICATION FORM

In order to be considered as a volunteer, the prospective volunteer must complete this application form and submit to a background check. A reference check may substitute for background checks for applicants who are minors or volunteers who are utilized for a specific, short-term assignment. Applicants who are minors must have parental or guardian written consent. Volunteers need not be residents of Red Wing.

TENNESEN WARNING (Data Practices Advisory)

As an applicant for the volunteer program with the City of Red Wing, I have voluntarily supplied true and complete data about myself which may be public and/or private in nature. I understand that, as part of the selection process, I am requested to supply this information. I understand that failure to provide accurate and adequate data may disqualify me from further consideration.

I further understand that this information will be used by the City of Red Wing to aid in the determination of my suitability for volunteering.

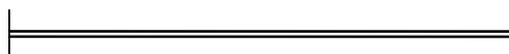
I, therefore, waive my right to claim and hereby agree to hold harmless the City of Red Wing and any of its agents or employees for any injury or damage which I may experience as a direct or indirect result of the intended use of this information.

It is understood and acknowledged that, unless otherwise defined by applicable law, labor union contract or other written agreement, any relationship with this organization is of an "at will" nature, which means that the volunteer may resign at any time and the employer may discharge the volunteer at any time with or without cause.

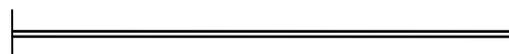
I authorize investigation of all statements contained in this application (and accompanying resume, if any). I understand that the misrepresentation, or the omission of facts called for, will result in immediate termination or disqualification.

Signature

Date



315 West 4th Street
Red Wing, MN 55066
Website: www.red-wing.org
Phone: 651.385.3600
Fax: 651.388.9608





Name:		Date of Application:
Address (no PO boxes, please):		
Email Address:		
Phone Number:		
Daytime Number		Evening Number
Are you 18 years old or older?		
Do you have a valid driver's license? If yes, please provide the number:		
If no, please provide your State ID # if available:		

1. Please briefly explain your interest in volunteering for the City.
2. What skills and talents do you have to perform the services you are interested in?
3. Do you have any other community or volunteer involvement experience either in Red Wing or another community? If yes, what entity and what was your role?
4. In order for the City to benefit from the volunteer program, there needs to be a commitment from the volunteer to maintain a certain level of volunteer service time. What do you see as your availability and time commitment?

Department or activity interest (check all that apply)
<input type="checkbox"/> Administrative support in City Administration <input type="checkbox"/> Flower maintenance in downtown or parks or cemetery <input type="checkbox"/> Library volunteer assignments <input type="checkbox"/> Sister City correspondence/documentation <input type="checkbox"/> Records research Finance Division <input type="checkbox"/> <input type="checkbox"/>

References: Please list name, address and a phone number where individual can be reached during the day.

1.	
2.	
3.	

Please return this application to: Volunteer Coordinator
 City of Red Wing
 229 Tyler Road
 Red Wing, MN 55066

For more information, contact us at: 651-385-5135
volunteer.coordinator@ci.red-wing.mn.us
www.red-wing.org

• Please note: If 18 years of age or older, a criminal background form will be required to proceed with this process. You will find it below.

To be completed by City Staff

- | | |
|--|------------|
| <input type="checkbox"/> Interview completed | date _____ |
| <input type="checkbox"/> Criminal Background completed if applicable | date _____ |
| <input type="checkbox"/> Reference checks completed if applicable | date _____ |
| <input type="checkbox"/> Other | date _____ |
| <input type="checkbox"/> Approved | date _____ |

CITY OF RED WING BACKGROUND INVESTIGATION DISCLOSURE, AUTHORIZATION AND RELEASE

I AUTHORIZE the City of Red Wing (“City”), its agencies, and any outside consumer reporting agency working on behalf of the City, to conduct a background investigation for the purpose of determining my suitability or eligibility for employment or a volunteer position with the City. In the event that an outside consumer reporting agency is used to conduct my background investigation, I authorize the City to disclose any and all information contained in my employment or volunteer application to the outside consumer reporting agency.

In the last ten (10) years, I have lived in the following locations:

ADDRESS	CITY	STATE	COUNTY	Dates Resided	
				FROM	TO

I AUTHORIZE and give my informed consent to all custodians of records and sources of information pertaining to me, including but not limited to Verified Credentials, Minnesota Bureau of Criminal Apprehension, all political subdivisions of the State of Minnesota, and all Law Enforcement Agencies in the above locations in which I have lived in the last ten (10) years, to release any and all private data that relate to me to the City and any outside consumer reporting agency conducting a background investigation on the City’s behalf. This Authorization is intended to be valid under the Minnesota Government Data Practices Act (MGDPA), the Minnesota Access to Consumer Reports Act, and the Fair Credit Reporting Act (FCRA). The terms used in this Authorization are to be defined in accordance with those state and federal laws.

The purpose of permitting the City to access private data related to me is to assist the City in determining my qualification and suitability regarding:

- Service as a volunteer in a position created by or sponsored by the City of Red Wing
- Employment as a City of Red Wing employee

I am not legally required to sign this Authorization; I am voluntarily choosing to do so because I want to be considered for the above-described position.

I UNDERSTAND that in connection with my potential position as a volunteer or employee, and during the course of any such service, I authorize the release of the following data on me: (Data authorized to be released is limited to those checked below)

- | | |
|--|---|
| <input type="checkbox"/> Criminal Search (County) | <input type="checkbox"/> Driving Record |
| <input type="checkbox"/> Criminal Search (Federal) | <input type="checkbox"/> Peer Credit Report |
| <input type="checkbox"/> Criminal Search (Statewide) | <input type="checkbox"/> Other |
| <input type="checkbox"/> National Criminal Database Search | |

I UNDERSTAND that if the City disqualifies me for the position solely or in part because of my prior conviction of a crime, the City will notify me in writing, if required, in accordance with Minnesota Statute Chapter 364.

I UNDERSTAND that any and all information that I have disclosed to the City in connection with my application may be used by the City to request reports to determine whether the information I have provided is true and correct.

I UNDERSTAND that I may be asked to authorize the release of other additional information, not herein identified, to allow the City to make further requests for data that relate to me. In the event that additional information is necessary, a new Authorization will be provided to me for my review and signature.

FAIR CREDIT REPORTING ACT & MN ACCESS TO CONSUMER RIGHTS ACT

NOTE: These rights only apply to those individuals applying for employment with the City whose background investigations are conducted by an outside consumer reporting agency. If the City, rather than an outside consumer reporting agency, contacts a law enforcement agency for a background report, the law enforcement agency is not a “consumer reporting agency” and reports directly requested by the City from law enforcement agencies are not “consumer reports” within the meaning of the law.

I UNDERSTAND that a consumer report or investigative consumer report (“Consumer Report”) may be prepared summarizing the information gathered by an outside consumer reporting agency. If my prior employers, educational instructors, neighbors, and/or additional references are contacted, the report may include information obtained through personal interviews regarding my character, general reputation, personal characteristics, and mode of living. I hereby consent to their use in connection with my application for employment.

I UNDERSTAND that I have a right to request a written summary of consumer rights under the Fair Credit Reporting Act (FCRA). I may request information regarding the nature and scope of the report prepared which concerns me, and I may also request the nature and substance of all information about me contained in the files of the outside consumer reporting agency preparing that consumer report. I further understand that I have the right to obtain a copy of any consumer report which is provided to the City by an outside consumer reporting agency and which concerns me. I may do so by providing proper identification and submitting a written request to the City of Red Wing. I may also obtain a copy of such a report at the same time the report is provided to the City by checking “YES” below.

- YES**, I would like to request a copy of the consumer report which concerns me.
- NO**, I would not like to request a copy of the consumer report which concerns me.
- N/A**, I am applying for a position as a volunteer, and/or my background check is not being conducted by an outside consumer reporting agency.

By signing this Authorization, I hereby release all custodians of records and sources of information, including but not limited to Verified Credentials, the Bureau of Criminal Apprehension, all political subdivisions of the State of Minnesota, and all law enforcement agencies, from any and all liability which otherwise may accrue as a result of the release of any and all data, regardless of its accuracy. I also hereby release the City of Red Wing from any and all liability for its receipt and use of any data received pursuant to this Authorization.

I UNDERSTAND that I may revoke my consent in writing at any time. If I do not revoke my consent in writing, this Authorization will automatically expire one year from the date of my signature. A photocopy of this Authorization is to be treated in the same manner as the original.

Signature (Sign in Ink)

Today’s Date

Print full name & include middle name

Street Address

City

State

Zip Code

Other Names Used

Home Telephone Number

Social Security Number*

Driver’s License # and State of Issue

***Note** – The City is requesting your Social Security number solely for the purpose of running a background check. The City may not be able to obtain a complete and accurate background check if you do not provide your Social Security number.

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