

The City of Eagle Lake is currently accepting applications for the position of Police Officer (Part-Time). The Police Officer protects the citizens of Eagle Lake through crime prevention and detection by patrolling on foot, bicycle or in a vehicle and builds police officer/resident relationships through positive interactions with community members.

Minimum qualifications: Associate of Arts or Associate of Science Degree in law enforcement; licensed or eligible to be licensed by the Minnesota P.O.S.T. Board

For a complete job description and application, call 507-257-3218 or visit:  
<http://www.eaglelakemn.com/city/employment-opportunities>. Applications accepted until position is filled. The City of Eagle Lake is an EO, AA Employer.

**JOB DESCRIPTION  
CITY OF EAGLE LAKE**

<b>Position</b>	<b>Supervisor</b>	<b>Department</b>
Police Officer (Part-Time)	Police Chief	Police
<b>FLSA Classification</b>	<b>Supervises</b>	
Non-Exempt	None	

POSITION SUMMARY

Under the direct supervision of the Police Chief, the Police Officer protects the citizens of Eagle Lake through crime prevention and detection by patrolling on foot, bicycle or in a vehicle and builds police officer/resident relationships through positive interactions with community members.

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RELATIONSHIPS

EMPLOYEE CONTACTS

Works closely with Police Chief and other department employees. Works with City staff as needed.

OUTSIDE CONTACTS

Federal, State, County law enforcement personnel and related agencies; court and legal personnel and related agencies; media representatives and the general public.

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ESSENTIAL FUNCTIONS

- Assist in all public safety functions which include the Police Department and Civil Defense activities.
- Deter and detect unlawful activities by effective patrol of assigned areas. Seek abnormal conditions, inspect premises, check suspicious persons or vehicles and provide a visible law enforcement presence. Maintain lookout for wanted persons and property and maintain surveillance in problem areas.
- Respond to and handle calls and complaints. Summons medical help and provide first aid when necessary. Apprehends violators. Perform initial criminal investigation work including identifying evidence, questioning victims and witnesses. Arrest and process suspects. Prepare evidence for court presentation and testify in court. Serve subpoenas as directed.
- Monitor and ensure proper flow of automobile traffic. Direct traffic as needed, report hazardous conditions, give warnings and issue citations. Enforce parking ordinances, report abandoned or damaged vehicles and assist stranded motorists.
- Investigate and prepare reports on traffic accidents. Gather evidence from driver, witnesses

and vehicle inspection. Prepare scale diagrams of the scene and prepare reports for police records, insurance investigations, court cases and coroners inquests.

- Maintain effective public relations, including answering questions, providing directions, prompt assistance, and participating in police public relation activities as directed.
- Perform required records and report work. Maintain log of activities, prepare case reports, record impounded property and prepare reports on traffic problems.
- Improve and maintain individual police skills, including participation in training, conferences and programs, learn effective use of equipment and investigative aids, and maintain skills with firearms.
- Participate in Towards Zero Death and other initiatives the department participates in.
- Reports streetlight outages to administrative staff.

#### ADDITIONAL FUNCTIONS

- Performs other related functions as assigned or apparent.
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#### EMPLOYMENT STANDARDS

##### EDUCATION AND EXPERIENCE

Minimum: Associate of Arts or Associate of Science Degree in law enforcement; licensed or eligible to be licensed by the Minnesota P.O.S.T. Board

##### CONDITIONS OF EMPLOYMENT

- Must possess a valid driver's license and be able to drive within the State of Minnesota
- Must be certified in First Aid or as a First Responder.
- Must meet department's physical and psychological standards.
- Ability to work evening and weekend hours.
- Must satisfactorily complete a background examination physical examination and drug testing.
- Must comply with organizational and departmental policies.
- Must comply with data practices policies and standards relative to not public data. Any access to not public data should be strictly limited to accessing the data that are necessary to fulfill the employment responsibility. While data are being accessed, incumbent should take reasonable measures to ensure the not public data are not accessed by individuals without a work reason. Once the work reason to access the data is reasonably finished the not public data must be properly stored according to city policy and the Minnesota Statutes.

### NECESSARY KNOWLEDGE, SKILLS, AND EXPERIENCE

- Considerable ability to deal with people with tact, patience and courtesy as well as with the necessary degree of firmness.
- Considerable knowledge of modern law enforcement principles, procedures, techniques and equipment.
- Considerable knowledge of applicable state and federal laws, city ordinances and department rules and regulations.
- Considerable ability to establish and maintain effective working relationships with peers and supervisors.
- Ability to perform work requiring good physical condition.
- Ability to communicate both effectively orally and in writing.
- Ability to exercise sound judgment in evaluating situations and in making decisions.
- Considerable skill in operating a police car, police radio, radar gun, handgun and other weapons as required, side handle baton, handcuffs, Breathalyzer, pager, first aid equipment, personal computer, and FAX machine.

### WORK ENVIRONMENT

The work environment characteristics described here are representative of those an employee will encounter while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

- While performing the duties of this job, the employee frequently works outside in all types of weather conditions. The employee occasionally works near moving mechanical parts; in high, precarious places; and with explosives and is occasionally exposed to wet and/or humid conditions, fumes or airborne particles, toxic or caustic chemicals, extreme cold, extreme heat and vibration.
- The noise level in the work environment is usually moderate.
- While performing the duties of this job, the employee is frequently required to sit, talk, see and listen. The employee is occasionally required to stand, walk, run, use hands to finger, handle, or feel objects, controls or tools listed above, reach with hands and arms, climb or balance, stoop, kneel, crouch, or crawl, taste or smell.
- The employee must occasionally lift and/or move up to 100 pounds. Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception and the ability to adjust focus.

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### JOB LOCATION/EQUIPMENT UTILIZED

Performs highly responsible general duty work within the Police Department. The primary objective is to protect the citizens of Eagle Lake through prevention and detection of crime by patrolling either on foot, bicycle or in a vehicle.

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### HOURS OF WORK

Daytime hours are 8:00 a.m.-5:00 p.m., while the evening shift runs from 4:00 p.m.-3:30 a.m. The part-time officer position is a fill in position, working mainly evening and weekend shifts, but also occasionally filling in daytime shifts during the workweek when the chief is on vacation or at a training.

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The job description does not constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer and requirements of the job change.

Revised: July 2018

***Eagle Lake welcomes you as an applicant for employment.***

It is the policy of the City of Eagle Lake to provide equal opportunity to all employees and applicants for employment. The City of Eagle Lake will not discriminate against or harass any employee or applicant for employment because of race, color, creed, religion, national origin, sex, disability, age, marital status, sexual orientation, or status with regard to public assistance. Our employment decisions are made on the basis of individual ability and merit. Upon request, accommodations will be provided to applicants in accordance with American with Disabilities Act (ADA). The City of Eagle Lake is an equal opportunity employer. Please call (507) 257-3218.

Applicant's Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Position Applying For: \_\_\_\_\_

**APPLICATION INSTRUCTIONS:**

To ensure that your application will be accurately processed, please review the following:

- (1) Please print or type when completing this form.
- (2) Complete a separate application form for each position opening you apply for, following instructions completely and signing your application where required.
- (3) Be specific and complete when filling out the Employment History section. Application forms that are incomplete will be removed from further consideration. If additional space is needed to complete your employment history, you may make copies of that page. A résumé may be attached to the completed application.
- (4) Applications must be received at City Hall by the advertised closing date and time. When the stated deadline is past, all applications will be reviewed and evaluated to determine how well each applicant is suited for the position opening.
- (5) Interviews will be conducted by the appropriate department head and/or City Council. Others may be involved as needed. After discussion, they will select the best applicant for the position.
- (6) The City Administrator's Office will inform the successful applicant and arrange a starting date. Applicants will be notified by mail that the position has been filled.
- (7) The City of Eagle Lake strongly encourages City employees to live within the City they serve.

**RETURN COMPLETED APPLICATION FORM TO:**

**City Administrator's Office  
City of Eagle Lake  
705 Parkway Ave., PO Box 159  
Eagle Lake, MN 56024**

Telephone: (507) 257-3218



If you have any questions concerning completion of your employment application or the employment procedures for the City of Eagle Lake, please call the City Administrator's Office.

**Employment Application**

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**TENNESSEN WARNING**

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In accordance with the Minnesota Government Data Practices Act, the City of Eagle Lake is required to inform you of your rights as they relate to the private information collected from you. Private data is information that is available to you, but not the public. The personal information we collect about you is private. Minnesota Statutes 13.04 and 13.43 are two sections that govern what affects you as an applicant for employment with the City of Eagle Lake. All data collected is considered private except for the following:

- (1) Your veteran's status.
- (2) Relevant test scores.
- (3) Your rank on our eligibility list.
- (4) Your job history.
- (5) Your education and training.
- (6) Your work availability.

Your name is considered private information; however, if you are selected to be interviewed as a finalist, your name becomes public information.

The data supplied by you may be used for such other purposes as may be determined to be necessary in the administration of personnel policies, rules, and regulations of the City of Eagle Lake. Furnishing social security numbers, date of birth (unless a minimum age is required), sex, age group, and disability data is voluntary, but refusal to supply other requested information will mean that your application for employment may not be considered.

Private data is available only to you, appropriate City employees, and others as provided by state and federal law who have a bona fide need for the data. Public data is available to anyone requesting it and consists of all data furnished in the application for employment that is not designated in this notice as private data.

Except for race, sex, age, and disability data, the information you give us about yourself is needed to identify you and to assist the Eagle Lake City Administrator's Office in determining your suitability for the position for which you are applying. Race, sex, age, and disability data are used in summary form by the City of Eagle Lake to monitor protected class employment and to meet federal, state, and local reporting requirements.

I declare that I have read and understand the information given above regarding the Minnesota Data Practices Act.

Applicant's Printed Name: \_\_\_\_\_

Applicant's Signature:  \_\_\_\_\_ Date: \_\_\_\_\_

# PERSONAL INFORMATION

## NAME / ADDRESS / PHONE:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Between hours of \_\_\_\_\_ and \_\_\_\_\_

Telephone: \_\_\_\_\_ Between hours of \_\_\_\_\_ and \_\_\_\_\_

Email: \_\_\_\_\_

Are you under 18 years of age?.....  No  Yes

If so, are you 16 years of age or older?.....  No  Yes

## EDUCATION

Educational Institution	Name and Address of Institution	Course (Major/Minor)	Level of Education	Did you Graduate (Y/N)	List Diploma or Degree Awarded
High School					
College					
College					
Other (Specify)					

## DRIVER'S LICENSE

*(Only complete this section if a driver's license is required for the position you are applying for.)*

Driver's License # \_\_\_\_\_ License Class (A, B, C, D) \_\_\_\_\_

State in which license is issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

## OTHER LICENSES & CERTIFICATES

Please list any other licenses, registrations, or certifications that are required or pertinent to the position you are applying for. If this licensing, etc., is required for the position, and you fail to include a photocopy of it with your application form, your name will be removed from further consideration for the position. If this licensing is not required for the position, but you feel it is relevant and may be an item for which we are awarding points, please indicate below for credit to be awarded.

Type of License or Certificate	Licensing Agency	Expiration Date	License Number

★★ Attach a copy of each license or certificate ★★



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**EMPLOYMENT HISTORY**

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- ◆ The City of Eagle Lake uses a 100-point system to assign value to the experience and training that relates most closely to the position you are applying for. Your experience and training will be scored using the experience and training value system designed for this position. Those applicants (typically the top 6 to 8) with the highest number of total points will be advanced for additional consideration.
- ◆ In order to receive the correct points and credit for the knowledge and skills you have acquired, it is absolutely necessary that you are specific when describing these skills. Do not use a single general statement to describe the duties you have performed. List each major duty performed for each position held within the past five years. Whether you are describing your experience as a clerical worker or a truck driver, list each duty separately and be specific. Describe duties in specific terms, such as "performed word processing using Word," or "operated forklift, front end loader, and back hoe." Statements such as "performed general clerical work" or "operated heavy equipment" are too general.
- ◆ Please be specific in stating the dates of employment and number of hours you worked per week for each job experience indicated. We need this information to properly score your experience. If hours worked per week vary, please use the average number of hours worked per week.
- ◆ Please include all of your relevant work experience in the Employment History section.
- ◆ Please give accurate and complete information. List your present or most recent experience first.

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★ DO NOT MARK YOUR APPLICATION "Please see résumé." ★

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**PRESENT OR MOST RECENT EMPLOYER**

Employer: \_\_\_\_\_ May we contact this employer?  No  Yes

Employer Address: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Average Number of Hours Worked per Week: \_\_\_\_\_

Numbers and types of positions you supervised: \_\_\_\_\_

Your Duties & Responsibilities:

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_  
(month & year) (month & year)

Reason for Leaving: \_\_\_\_\_

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**PREVIOUS EMPLOYER**

Employer: \_\_\_\_\_ May we contact this employer?  No  Yes

Employer Address: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Average Number of Hours Worked per Week: \_\_\_\_\_

Numbers and types of positions you supervised: \_\_\_\_\_

Your Duties & Responsibilities:

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_  
(month & year) (month & year)

Reason for Leaving: \_\_\_\_\_

**PREVIOUS EMPLOYER**

Employer: \_\_\_\_\_ May we contact this employer?  No  Yes

Employer Address: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Average Number of Hours Worked per Week: \_\_\_\_\_

Numbers and types of positions you supervised: \_\_\_\_\_

Your Duties & Responsibilities:

Dates of Employment \_\_\_\_\_ to \_\_\_\_\_  
(month & year) (month & year)

Reason for Leaving: \_\_\_\_\_

## PREVIOUS EMPLOYER

Employer: \_\_\_\_\_ May we contact this employer?  No  Yes

Employer Address: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Average Number of Hours Worked per Week: \_\_\_\_\_

Numbers and types of positions you supervised: \_\_\_\_\_

Your Duties & Responsibilities:

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_  
(month & year) (month & year)

Reason for Leaving: \_\_\_\_\_

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## PROFESSIONAL REFERENCES

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List people who know you well, preferably from a work environment and not an acquaintance or relative.

Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Occupation \_\_\_\_\_

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Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Occupation \_\_\_\_\_

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Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Occupation \_\_\_\_\_

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**CLAIM FOR VETERAN'S PREFERENCE**

The eligibility requirements for veteran's preference are listed below. Read them carefully to see if you qualify. If you do wish to receive preference, be sure to complete this section. Anyone eligible for receiving a monthly veteran's pension benefit based exclusively on length of military service is not eligible. Providing the information in this section is voluntary. You must do so if you wish to obtain the preference.

**Veteran Eligibility for Open Competitive Position (5 Points)**

Must be a U.S. Citizen or resident alien who has separated under honorable conditions:

- (1) After serving on active duty for 181 consecutive days, or
- (2) By reason of disability incurred while serving on active duty.

**Disabled Veteran Eligibility for Open Competitive Position (10 Points)**

Must have a compensable service connected disability as adjudicated by the United States Veteran's Administration or by the Retirement Board of the several branches of the armed forces and the disability must exist at the time preference is claimed.

**Disabled Veteran Eligibility for Promotional Position (5 Points)**

Must, at the time of election to use preference, be entitled to disability compensation for a permanent service-connected disability rated at 50% or more and the position for which you are applying must be the first promotion after entering public employment.

**Eligibility as a Spouse of a Deceased or Disabled Veteran**

Must be a spouse of either a deceased veteran or the spouse of a disabled veteran who, because of a disability, is unable to qualify for the particular position due to his/her disability and who would have or does meet the criteria for one of the above-listed preferences.

ALL APPLICANTS CLAIMING VETERAN'S PREFERENCE MUST ATTACH A COPY OF HIS/HER FORM DD214. FAILURE TO DO SO MAY RESULT IN LOSS OF VETERAN'S PREFERENCE ELIGIBILITY.

City of Eagle Lake Veteran's Preference Claim Form

**For V.A. Use Only:** Is the veteran named below rated as having a compensable service-related disability?

No  Yes % of Disability \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Name of Veteran (last - first - middle)

\_\_\_\_\_  
Name of Applicant - if different than veteran (last - first - middle)

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Classification

**To Be Completed by Veteran or Spouse of Deceased Veteran**

- (1) Are you a U.S. Citizen or resident alien? .....  No  Yes
- (2) Were you honorably discharged from military service? .....  No  Yes
- (3) Were you separated from military service after serving active duty for at least 181 consecutive days? .....  No  Yes
- (4) Do you currently have a compensable service-related disability? .....  No  Yes
- (5) Are you currently receiving a monthly pension based exclusively on length of military service? .....  No  Yes
- (6) Branch of Service \_\_\_\_\_ Date of Discharge \_\_\_\_\_ Serial Number \_\_\_\_\_  
Type of Separation \_\_\_\_\_ Date of Entry \_\_\_\_\_  
For spouse of deceased veteran, date of death \_\_\_\_\_

**If Spouse of Disabled Veteran, please answer the following:**

If spouse is disabled, please explain why your spouse does not qualify for this position: \_\_\_\_\_

\_\_\_\_\_  
Claim is Filed In

\_\_\_\_\_  
Signature of Veteran Social Security Number Date

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**EMPLOYEE CERTIFICATION**

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**Before signing this application, please read the following waiver carefully.**

- (1) I have read and understand the job announcement for the position for which I am applying and certify that the answers given in this application are true and complete to the best of my knowledge.
- (2) I authorize all current and previous employers to release job-related information upon the written request of the City Administrator's Office. However, I understand that if, in the Employment History section, I have answered "No" to the question, "May we contact this employer?," contact with the employer will not be made without my specific authorization.
- (3) I authorize the City Administrator's Office to verify all information on this application to determine whether or not I am qualified for the position for which I am applying.
- (4) I understand that providing false information on this application may result in dismissal from any position gained on the basis of that false information.

Applicant's Printed Name: \_\_\_\_\_

Applicant's Signature:  \_\_\_\_\_ Date: \_\_\_\_\_

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**BEFORE YOU SUBMIT YOUR APPLICATION, HAVE YOU . . . .**

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- Thoroughly read this entire application with special attention to the Tennessen Warning?
- Signed this application in all the required places? This application will not be accepted without all necessary signatures.
  - Tennessen Warning
  - Claim for Veteran's Preference, if applicable
  - Employee Certification
- Provided sufficient information so that proper credit for training and experience are given?
- Completed the claim for Veteran's Preference if applicable to you? Also, a copy of your Form DD214 must be submitted at the time of application to determine your eligibility for points.
- Included copies of all required licensing and/or certifications?

The City of Eagle Lake needs your cooperation in the completion of this form. It will enable the City to report accurate information to both the State and Federal governments.

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**AFFIRMATIVE ACTION APPLICANT INFORMATION**

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**To All Applicants:**

The following information in no way affects you as an individual applicant. This information will be used to find out how effective our recruitment efforts are in reaching all segments of the population and in validation of our selection methods. The information will **not** be maintained in personnel files and it will not be made available to any person involved in decisions affecting an individual's appointment or promotion to a position. Although providing this information is voluntary, it is important that all applicants answer these questions so that we may take steps to prevent discrimination in the recruitment and selection of employees for public service.

**Position Applying For:** \_\_\_\_\_

**Department:** \_\_\_\_\_

*Instructions: Check the choice that answers each of the following questions.*

(1) What sex are you?      Male  Female

(2) Of the following, of what racial/ethnic group do you consider yourself?

- American Indian/Alaskan Native
- African American
- Asian and Pacific Islander
- Spanish or Mexican American
- White
- Other \_\_\_\_\_

(3) Do you have a disability?    No    Yes

(4) How did you learn about this job opening?

- City Website
- Lake Region Times
- Mankato Free Press
- Minority or Female Publication/Organization
- School
- League of MN Cities Website
- City Employee
- Minnesota Job Bank
- Walk-In
- Posting in City Hall
- Craig's List
- Other (be specific) \_\_\_\_\_