

420 N. Pokegama Ave Grand Rapids, MN 55744 (218)326-7606 (218)326-7608 Fax www.cityofgrandrapidsmn.com

# **Employment Application**

An Equal Opportunity Employer

Please complete by printing in ink or typing. Application must be signed for employment consideration.

Thank you for considering employment with the City of Grand Rapids. We welcome you as an applicant and look forward to reviewing your application information. It is the City's policy to provide equal opportunity in employment. The City will not discriminate on the basis of race, color, creed, age, religion, national origin, marital status, disability, sex, sexual orientation, familial status, status with regard to public assistance, local human rights commission activity or any other basis protected by law.

Please furnish complete information on the application form, so we may accurately and completely assess your qualifications. You may attach any other information that provides additional detail about your qualifications for employment in the position you seek. Please refer to the Applicant Data Practices Advisory for guidance regarding how your application information will be used, the consequences of providing or not providing information, and more.

The City of Grand Rapids accommodates qualified persons with disabilities in all aspects of employment, including the application process. If you believe you need a reasonable accommodation to complete the application process, please contact Human Resources at 218-326-7606.

NAME Last	First	Mi	ddle	POSITION APPLIED FOR:	
Davis	Christina	Lin	l	Lead Security Officer	
MAILING ADDRESS				TODAY'S DATE: DATE AVAILABLE TO	) WORK:
				09/17/2024 As soon as needed.	
				STATUS DESIRED:	
				✓ Full-time	
				EMAIL ADDRESS:	
Are you a U.S. citizen or Authorization to work in Proof of age and/or e work may be request Will your continued emp employer sponsorship?	the U.S.? ligibility to red.	YES		Do you have a valid driver's license? YES N (For driving positions only)	2

## PERSONAL INFORMATION

## EDUCATIONAL INFORMATION

School Name, City and State		Major Area of Study
High School: Duluth Central High School Duluth, MN	Diploma 🖌 YES 🗌 NO GED 🗌 YES 🖌 NO	
College:	Degree Completed:   YES Associates Bachelors Masters Other   NO # of years completed   Semester/Credit hours earned	
Graduate School:	Degree Completed:   YES Associates Bachelors Masters Other   NO # of years completed   Semester/Credit hours earned	
Technical or Vocational Programs: Lake Superior College	(indicate type of certificate earned) CNA Certificate	Certified Nurse's Aide

List any other courses, seminars, workshops, or training you have that may provide you with skills related to this position:

TASER Training Use of Force Training Defensive Tactics Training

#### List any current licenses or certificates you possess which may be related to this position:

Valid MN Driver's License

List any current registration(s) or membership(s) related to the position for which you are applying:

## EMPLOYMENT EXPERIENCE

CURRENT EMPLOYMENT INFORMATION					
EMPLOYER	DATES EMPLOYED		JOB TITLE: Hospital Security		
City of Grand Rapids	FROM	ТО			
ADDRESS		_	NAME OF LAST SUPERVISOR:		
420 N. Pokegama Ave	10/2021	Present	Kevin Ott		
CITY, STATE, ZIP	DESCRIBE YOUR WORK IN THIS JOB:				
Grand Rapids, MN 55744	Maintains	security at GICH	Respond to complaints regarding hospital safety.		
TELEPHONE Area Code + Number	Minimize disruptions and de-escalate situations and persons when needed.				
218-326-7626	Prepare written reports and a daily log to document activity.				
May we contact this employer?  Yes  No	Respond to emergencies that affect staff, patients and visitors. Routine interior and exterior security checks.				
	Direct traffic, assist with crowd control, and secure helipad as needed.				
Full-time Part-time Other	Effectively communicate with GRPD regarding emergencies on GICH property.				
	Performs duties as assigned by GRPD and hospital administration.				
REASON FOR LEAVING:	Attend GICH safety meetings. Prepare security activity reports and present to GICH administration.				
Currently employed.		h vehicle lock-out			
	Maintain s	security vehicle su	ich as gas and wash.		
<b>PREVIOUS EMPLOYMENT INFORMATION</b> List all positions held including full-time, part-time, military, summer, volunteer work and any periods of unemployment. Explain any period of unemployment. Attach additional sheet if necessary.					
EMPLOYER	DATES EMPLOYED		JOB TITLE: Admissions Financial Representative		
Grand Itasca Clinic and Hospital	FROM	ТО			
ADDRESS 1601 Golf Course Rd	08/2019	10/2021	NAME OF LAST SUPERVISOR: Kari Frizzel		
CITY, STATE, ZIP	DESCRIBE YOUR WORK IN THIS JOB: Register patients presenting to the Emergency Department. Apply and verify insurances. Answer patient questions and de-escalate as needed. Remain in compliance with federal patient forms. Answer the phones for switchboard afterhours.				
Grand Rapids, MN 55744					
TELEPHONE Area Code + Number 218-326-3401					
May we contact this employer?  Yes No					
Full-time Part-time Other	Direct patients to appropriate units.				
REASON FOR LEAVING:					
Began work for City of Grand Rapids.					
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EMPLOYER	DATES E	MPLOYED	JOB TITLE:		
Residence Inn by Marriott Minneapolis St. Paul/Eagan	FROM	ТО	Assistant General Manager		
ADDRESS			NAME OF LAST SUPERVISOR:		
1560 Quarry Rd	12/2018	08/2019	Robert Everson		
CITY, STATE, ZIP	DESCRIBE YOUR WORK IN THIS JOB:				
Eagan, MN 55121	Manage each department with the ability to complete every task				
TELEPHONE Area Code + Number	necessary.				
651-452-6020	Hire and train new staff. Provide excellent customer service and maintain the highest of				
May we contact this employer?  Yes No	standards.				
May we contact this employer?  Yes No	Schedule staff according to need and budget.				
Full-time Part-time Other	Complete reports as assigned by corporate. Ran the whole building with limited staff while maintaining excellent				
	customer sur	rvey scores. I was	a salaried employee working up to 80		
REASON FOR LEAVING:	hours per week.				
No work/life balance.					

<b>PREVIOUS EMPLOYMENT INFORMATION CONTINUEI</b> List all positions held including full-time, part-time, military, sum Attach additional sheet if necessary.	D 1mer, volunteer work	and any period	ls of unemployment. Explain any period of unemployment.
EMPLOYER	DATES EMPLOYED		JOB TITLE:
	FROM	ТО	
ADDRESS			NAME OF LAST SUPERVISOR:
CITY, STATE, ZIP	DESCRIBE YOUR WORK IN THIS JOB:		
TELEPHONE Area Code + Number	-		
May we contact this employer? Yes No			
Full-time Part-time Other			
REASON FOR LEAVING:	$\neg$		
EMPLOYER	DATES EMPLOYED		JOB TITLE:
	FROM	ТО	_
ADDRESS			NAME OF LAST SUPERVISOR:
CITY, STATE, ZIP	DESCRIBE Y	OUR WORK IN	N THIS JOB:
TELEPHONE Area Code + Number			
May we contact this employer? Yes No	$\neg$		
Full-time Part-time Other	-		
REASON FOR LEAVING:	-		
I			
EMPLOYER	DATES EN	MPLOYED	JOB TITLE:
	FROM	ТО	-
ADDRESS			NAME OF LAST SUPERVISOR:
CITY, STATE, ZIP	DESCRIBE Y	OUR WORK IN	N THIS JOB:
TELEPHONE Area Code + Number			
May we contact this employer? Yes No	-		
Full-time Part-time Other			
REASON FOR LEAVING:	-		

#### UNPAID EXPERIENCE

Describe any unpaid or volunteer experience relevant to the position for which you are applying (you may include, if you wish, information which would reveal race, sex, religion, age, disability, or other protected status).

### MILITARY EXPERIENCE

Did you serve in the U.S. Armed Forces? Yes Yes No
Describe your duties:
Do you wish to apply for Veteran's Preference points: $\  \  Yes \qquad  \   \  Y $
If you answered "yes," you must complete the enclosed application for Veterans' Preference Points, and submit the application and
required documentation to the City of Grand Rapids by the application deadline of the position for which you are applying.

## AUTHORIZATION

#### \*PLEASE READ CAREFULLY BEFORE SIGNING\*

I certify that all information I have provided in this application for employment is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or if employed, will be grounds for dismissal, regardless of length of employment or when the misrepresentation or omission is discovered.

I understand that submission of an application does not guarantee employment. I acknowledge that I have received a copy of the job description summary for the position/s for which I am applying. I further acknowledge my understanding that employment with the City of Grand Rapids is "at will," and that employment may be terminated by either the City of Grand Rapids or me at any time, with or without notice. I understand that none of the documents, policies, procedures, actions, statements of the City of Grand Rapids or its representatives used during the employment process is deemed a contract of employment, real or implied. I further understand that this "at will" 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 the City of Grand Rapids. In consideration for employment, if employed, I agree to conform to the rules, regulations, policies, and procedures of the City of Grand Rapids at all times and understand that such obedience is a condition of employment.

I understand that if offered a position with the City of Grand Rapids, I may be required to submit to a pre-employment medical and psychological examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already offered.

With my signature below, I am providing the City of Grand Rapids authorization to verify all information I provided within this application packet, including contacting current or previous employers. However, I understand that if, in the Employment Experience section I have answered "No" to the question, "May we contact your current employer?," contact with my current employer will not be made without my specific authorization.

I have read the included Applicant Data Practices Advisory, and I further understand that criminal history checks may be conducted (after I have been selected for an interview, in the case of non-public safety positions) and that a conviction of a crime related to this position may result in my being rejected for this job opening. I also understand it is my responsibility to notify the City of Grand Rapids in writing of any changes to information reported in this application for employment.

09/19/2024

Date

Name and number of person completing this form if other than applicant: