




 430 Third St., Farmington, MN 55024
 651-280-6800
 FarmingtonMN.gov

APPLICATION FOR BOARD OR COMMISSION APPOINTMENT

(Applicants must be at least 18 years of age, a U.S. Citizen, a resident of Farmington and pass a background check)

Date of Application _____

Name _____

Address _____

Daytime Phone No. _____ Cell Phone _____

E-Mail Address (Required) _____

Employed By _____

Board or Commission you wish to serve on: (Indicate 1st choice and 2nd choice (if desired))

_____ **Parks and Recreation Advisory Commission**
(Meets 2nd Wednesday monthly 7 pm)

_____ **Planning Commission**
(Meets 2nd Tuesday monthly 7 pm.
Meetings are televised)

_____ **Rambling River Center Advisory Board**
(Meets 2nd Monday monthly 9:30 am)

_____ **Water Board**
(Meets 4th Monday monthly 5 pm)

Have you previously served on any committees to the City Council in Farmington? If so, list committee and time served.

Have you previously served on public boards or commissions in any other cities? If so, list them below.

What is your education background?

_____ High School Completed
_____ College degree (specify) _____
_____ Trade or vocational (specify) _____

Do you live within the Farmington city limits (or a township for the Rambling River Board)

_____ Yes _____ No

Why are you interested in serving on the selected board or commission?

What do you feel are the greatest duties and responsibilities of the specific area of the board or commission?

—

_ What do you think are the most important issues facing our community over the next several years?

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Describe what issues and ideas you would like to see addressed by the board or commission you would like to serve on.

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Are you aware of the meeting schedule for the board or commission you are interested in, and also willing and able to attend the meetings regularly?

_____ Yes _____ No

As a commissioner or board member, what issue(s) might cause conflict between your civic responsibility and personal or professional interest? How would you manage these conflicts?

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I hereby certify that every statement I have made in this application is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions on either the application or during my interview may disqualify me from further consideration for appointment to an advisory board. I authorize investigation of all statements contained in this application or made during my interview as may be necessary.

The information you provide will be used to identify you as an applicant, enable us to contact you when additional information is required, send you notices, and assess your qualifications for appointment. This data is not legally required, but refusal to supply the information requested may affect our ability to accurately evaluate your application.

Signature _____ **Date** _____

Return application to City Clerk Shirley Buecksler, Farmington City Hall, 430 Third Street, Farmington, MN 55024 or SBuecksler@FarmingtonMN.gov. **Due by December 4, 2023 at 4 p.m.**

CITY OF FARMINGTON
GENERAL AUTHORIZATION AND RELEASE OF DATA

In order to comply with State and Federal Data Privacy Act Laws, the City of Farmington is requesting your authorization and consent to permit the City to conduct a background investigation. Please provide the following personal data, read the paragraphs below and sign where indicated.

Full Name: _____
(First, Middle, Last)

Address: _____
Number Street City County State Zip Code

Date of Birth: _____ Driver's License Number: _____
Month/Date/Year

Have you ever been convicted of any crime, either felony or misdemeanor? _____ If yes, please state place and nature of offense: _____

I, the undersigned, hereby authorize and grant my informed consent to permit the Bureau of Criminal Apprehension (hereafter "BCA") and the Farmington Police Department (hereafter "FPD") to release to and make available to the City of Farmington, Minnesota (hereafter "City") and/or its representatives all data classified as private which concerns me and which may be in your possession. The data, classified as private under M.S. 13.02, Subd. 12, includes all data which has been collected, created, received, retained or disseminated in whatever form which in any way relates to my dealings with the BCA and/or the FPD. I understand the purpose of permitting the City to have access to this information is to determine my suitability for licensure.

By signing this authorization, I hereby release the BCA and the FPD from any and all liability which otherwise may or does accrue as a result of the release of any and all data, regardless of its accuracy. I also release the City from any and all liability for its receipt and use of data received pursuant to this consent. I understand that if I am rejected on the basis of a criminal conviction, I will be notified in writing and be given rights of redress subject to applicable laws. I also understand that I am not legally required to sign this form, but if I do not, the City will not be able to determine whether my conviction record is a license-related consideration.

This authorization shall be valid for a period of one year, but I reserve the right, at any time prior to that expiration, to cancel the written authorization by providing written notice to the City of that intent.

(Signature)

(Date)

(Full Name Printed)

CITY OF FARMINGTON – DATA PRACTICES ACT NOTICE

Minnesota law requires that you be informed of your rights as they pertain to private information (“private data”) collected from you by the City of Farmington (“the City”). Private data is that information held by the City which is available to you, but not to the public.

You have the right to refuse to provide the information requested on this application form, however, without certain information, the City may be unable to approve the license applied for. If you feel that certain information requested is an unwarranted invasion of privacy, please contact the Human Resources Director.

The dissemination and the use of private data we collect is limited to that necessary for the administration and management of the City’s licensing program. Persons or agencies with whom this information may be shared include:

- City personnel, including law enforcement personnel, administering the license program;
- The Bureau of Criminal Apprehension;
- The City Attorney and support staff of the City Attorney’s office;
- Federal, state, local, and contracted private auditors;
- Federal and State agencies with oversight or responsibility related to the licensed business;
- Those individuals or agencies as to whom you give your express written permission for release of the information.

Unless otherwise authorized by state statute or federal law, other governmental agencies utilizing the reported private data must also treat the information as private.

You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include:

- The right to see and obtain copies of data maintained about you;
- The right to be told the contents and meaning of the data; and
- The right to contest the accuracy and completeness of the data.

To exercise these rights, contact the Farmington Human Resources Director at 430 Third Street, Farmington, MN 55024 or 651-280-6800. I have read and I understand the above information regarding my rights as a subject of government data.

Applicant

Date