



## TO PROSPECTIVE APPLICANTS FOR THE CITY OF MEDINA FINANCE DIRECTOR

Application materials required for this position include the following items:

- Cover Letter
  - One-page, single-spaced. Include a statement or paragraph addressing why you would be the best candidate for this position.
- Resume
- Completed Application
- Supplemental Application
- Veteran's Preference Form
- Finance Director Supplemental Questionnaire Form

The application will be disqualified if any of the above information is not submitted or is incomplete.

### MINIMUM QUALIFICATIONS FOR POSITION

- Bachelor's degree in accounting, business administration, finance, public administration or related field.
- Two years of experience in finance or accounting operations
- Valid Minnesota's driver's license or ability to obtain one prior to start date.

**Deadline for Application Packets:** Must be received by 4:30 PM, November 22<sup>nd</sup>, 2024.

Email completed application to: [caitlyn.walker@medinamn.gov](mailto:caitlyn.walker@medinamn.gov)

**Questions regarding the materials or hiring process should be directed to:**

Caitlyn Walker, Assistant City Administrator (763) 473-8850 or [caitlyn.walker@medinamn.gov](mailto:caitlyn.walker@medinamn.gov)

### **Profile of the City of Medina**

The City of Medina has been an incorporated city since 1974 and has a population of about 7,600 people. The community continues to experience rural-residential, urban-residential, and commercial growth in what has historically been a fairly predominant rural setting. Most of Medina's commercial and higher-density residential growth is guided to progress along the Trunk Highway 55 Corridor. Medina consists of 26 square miles, with approximately 28% of the land cover consisting of water (wetlands, lakes, etc.).

The City of Medina employs 30 full time employees and 4 part-time employees. The City Administrator is the chief administrative officer for the City. Four department heads report to the Administrator, including the Finance Director, Public Works Director, Planning Director, and Public Safety Director. Several consultants also serve the City in building inspection, planning, assessing, finance, legal counsel and engineering.

### **Profile of the Finance Director**

The Finance Director administers all city financial functions and provides assistance to the City Administrator and City Council on financial planning matters. The Finance Director supervises two full-time employees, the Accountant and Accounting Technician. A part-time administrative assistant serves both the Finance and Administration Departments.

### **Summary of Benefits and Wages**

The City of Medina is offering an annual salary range of \$91,790.40 - \$134,388.80 for this position, dependent upon experience and qualifications, along with a comprehensive benefits package:

- 100% employer-paid individual premiums and up to \$1,753.00 per month towards family premiums. Premiums amounts greater than \$1,753.00 are then split 50/50 between employer and employee
- \$3,000 annual City contribution to HSA or HRA account
- 100% employer-paid dental insurance for individual and family premiums
- 100% employer-paid long-term disability insurance
- \$30,000 employee life insurance with optional additional coverage for employee, spouse, and/or dependents
- PERA retirement program with 7.5% employer contribution and 6.5% employee contribution
- Optional employee paid participation in Minnesota State Deferred Compensation Plan (MNDCP)
- 11 paid holidays, 2 paid personal holidays
- Vacation accrual based on years of service
- Sick and Safe Leave accrual – 8 hours per month (May be accumulated and banked to a maximum of 960 hours)
- Option to participate in the City's flexible work arrangement program

City of Medina Position Description  
FINANCE DIRECTOR

**Position Title:** Finance Director  
**Department:** Administration/Finance  
**Supervisor's Title:** City Administrator

**Pay Grade:** Step 8-9, DOQ  
**FLSA Status:** EXEMPT  
**Work Status:** Full-time

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**PRIMARY OBJECTIVE OF POSITION**

Administers all City financial functions and provide assistance to the City Administrator and City Council on financial planning matters. Perform highly responsible and independent professional work related to financial management and planning, including the accurate accounting of all financial transactions, funds, assets, and functions.

**ESSENTIAL FUNCTIONS OF POSITION**

- Serves as department head for all financial planning functions.
- Participates with City Administrator in establishing goals, budget plans and implementation strategies to ensure desired level of financial planning and management activities are provided.
- Maintains, evaluates, and improves an accounting system in accordance with the City's needs and all applicable standards.
- Prepares memorandums, quarterly reports, and the annual budget for presentation in collaboration with the City Administrator and City Council.
- Reviews department expenditures, revenues and requests with City Administrator.
- Formulates short-term and long-term budget planning of revenues, expenditures, fund balances, and debt service.
- Maintains and prepares the City's Capital Improvement Plan.
- Prepares adopted budget for publication, and reports as required by county and state.
- Administers preparation of City's external Annual Financial and Tax Increment Reports.
- Maintains a system of financial control and debt management to protect the financial condition of the City and its operations.
- Administers and designs a system of investments to assure sufficient cash is available for payables, as well as to assure idle cash is invested to maximize investment yields.
- Coordinates and oversees the issuance of bonds and debt service schedules.
- Maintains special assessment system and associated records.
- Administers the City's insurance policies and programs, including liability, workers compensation and property.
- Maintains the City's fixed assets system, inventory, and compliance with proper controls.
- Supervises the City's utility accounting programs.
- Represents the City of Medina in a tactful manner that commands respect of the public, colleagues, consultants, developers and others.

**OTHER DUTIES AND RESPONSIBILITIES**

- Assists in administering and soliciting grants from local, regional, state, or federal authorities.
- Prepares memos, articles, or updates on financial activities for the City's newsletter.
- Represents City on task forces, committees, or meetings involving financial planning issues.
- Oversees city-wide fund accounting, payroll, financial planning and utility software programs.
- Provides annual notice of outstanding special assessments to residents.
- Provides good working habits and a willingness to cooperate with others and contribute in a positive way to a pleasant working climate.

City of Medina Position Description  
FINANCE DIRECTOR

- Performs other duties and responsibilities as apparent, or assigned by the City Administrator.

**HIRING AND PERFORMANCE ASSESSMENTS WILL INCLUDE THE FOLLOWING KNOWLEDGE, SKILLS, AND ABILITIES:**

- Knowledge of generally accepted accounting principles as defined by GASB.
- Knowledge of governmental accounting procedures as defined by the GFOA.
- Knowledge of City operations and practices related to finance, accounting and budgeting.
- Knowledge of laws, practices, and regulations applicable to City government finances.
- Knowledge of investment options and banking activities.
- Skill in coordinating flow of information and communication between staff, consultants, committees, and City Council, with the ability to effectively manage time and work to meet deadlines.
- Skill of excellent verbal and written communication.
- Ability to apply City's financial regulations and to prepare and administer an annual budget.
- Ability to analyze and interpret financial information and prepare accurate financial statements.
- Ability to be public service oriented with tactful and effective conflict resolution skills.
- Ability to make effective oral presentations to staff, committees and the City Council.
- Ability to establish and maintain effective work relationships with a variety of groups and individuals.
- Ability to have a creative, inquiring and innovative manner willing to explore new approaches, implement new methods, and be receptive to suggestions of others.
- Will have a high degree of integrity and a high sense of personal and professional ethics.

**MINIMUM QUALIFICATIONS**

- Bachelors degree in accounting, business administration, finance, public administration or related field.
- Two years of experience in finance or accounting operations.
- Valid Minnesota driver's license or ability to obtain one prior to start date.

**DESIRABLE QUALIFICATIONS**

- Masters degree in accounting, business administration, finance or public administration or related field.
- Municipal government experience or private consulting experience working with local governments.
- Supervisory experience.

**SUPERVISION OF OTHERS**

Supervises Accountant and Accounting Technician, interns or part-time employees in finance department.

**WORKING CONDITIONS**

Most work is performed indoor at city hall. The exception is trips to meetings, training, conferences, local bank, and other City property. Generally, the position requires light lifting, usually less than 10 pounds, with up to 50 pounds on occasion. Aside from cleansers for cleaning office workspace, no hazardous materials or chemicals are used on this job.



*You must complete this application fully, even if information is duplicated on a resume or cover letter. Falsified or misleading statements on this application may be grounds for disqualifying you from being further considered for employment with the City of Medina.*

**How did you learn about this position?** *(Optional) (Please circle one)*

Newspaper/Publication: Crow River News LMC Cities Bulletin City Website Other: \_\_\_\_\_

EMPLOYMENT DESIRED			
Title of Position Applying For		Date Available for Work	Salary/Wage Required
Available to work:	Full-time	Part-time	Temporary Seasonal
<i>(Check one)</i>			

PERSONAL INFORMATION			
First Name		Last Name	Middle Name
Current Mailing Address		City	State Zip Code
Phone Number		Email address:	

**Are you at least 18 years of age?** NO YES

**Are you a U.S. Citizen or legally eligible to work in the U.S.?** NO YES  
*(If hired, you will be required to provide documentation that you are eligible to work)*

**Have you filed an application with the City of Medina previously?** NO YES If yes, give date(s)

**Have you ever been employed by the City of Medina previously?** NO YES If yes, give date(s)

**Request for Accommodation**

If you require assistance in the hiring process because of a special need, please contact the City Administrator at the City to make a specific request for reasonable accommodation.

\*\*\*\*\*List the most recent (or current) employer first, then next most recent, and so forth.\*\*\*\*\*

<b>WORK EXPERIENCE</b>		<b><i>Employer 1</i></b>
<i>May we contact this employer?</i> YES                      NO    If no, explain:		
Employer		Phone Number
Address		Supervisor's Name and Title
Position Title	Description of Duties	
Length of Employment From:                      To:		
Hours Worked per Week		
Reason for Leaving		
<b>WORK EXPERIENCE</b>		<b><i>Employer 2</i></b>
<i>May we contact this employer?</i> YES                      NO    If no, explain:		
Employer		Phone Number
Address		Supervisor's Name and Title
Position Title	Description of Duties	
Length of Employment From:                      To:		
Hours Worked per Week		
Reason for Leaving		
<b>WORK EXPERIENCE</b>		<b><i>Employer 3</i></b>
<i>May we contact this employer?</i> YES                      NO    If no, explain:		
Employer		Phone Number
Address		Supervisor's Name and Title
Position Title	Description of Duties	
Length of Employment From:                      To:		
Hours Worked Per Week		
Reason for Leaving		

**EDUCATION**

Did you graduate from high school or receive a GED?      YES                      NO

Name and Location of School/Program attended: \_\_\_\_\_

Name and Location of College, University, or Technical School	Did you graduate?	Degree/Diploma	Program of Study
	YES      NO		
	YES      NO		
	YES      NO		

**REFERENCES**  
*Please list three individuals (not relatives), who have known you for at least 1 year, who can attest to your work qualities.*

Name and Occupation	Present Address	Phone Number

**ACKNOWLEDGEMENT**

I understand the City of Medina has the right to verify information contained in this application. I authorize the City of Medina and any agent acting on its behalf to investigate all statements contained in this application for employment and any addendum, including, but not limited to, my educational records such as transcripts, and work records as may be necessary to determine my eligibility for employment. Moreover, I hereby release the City of Medina and any agent acting on its behalf from any and all liability by reason of requesting such information from any person or entity.

I certify that answers given herein are true and complete to the best of my knowledge and I understand that, if employed, falsified or misleading statements on this application and addendum or made during an interview, which may be discovered now or anytime in the future, shall be grounds for dismissal. I acknowledge that this document shall not be construed as a contract or offer of employment and understand and agree that, if hired, my employment is for no definite period and may be terminated at any time.

Signature \_\_\_\_\_ Date \_\_\_\_\_



## IMPORTANT FACTS ABOUT INFORMATION ON YOUR APPLICATION

Certain information in this application is considered private; that is, it may be released only to you and agencies where you may be considered for employment. Information in this application that is defined by law as *public* may be released on request and includes: veteran status; relevant test scores; rank on eligible list; job history; education and training; and work availability. Your name is private data except when certified as eligible for appointment to a vacancy or when you are considered by the appointing authority to be a finalist for a position in public employment. (To comply with M.S. 13.43, Subd. 2 and Subd 3).

Private Data	Why We Ask For It?	Are You Legally Obligated To Provide It?	What May Happen If You Don't Provide It?
Name	To distinguish you from all other applicants.	Yes	Failure to provide may be cause for rejection of your application.
Address	To be able to send you correspondence.	Yes	Failure to provide may be cause for rejection of your application.
Home Telephone	To be able to contact you to arrange for an interview, if granted.	No	We may not be able to employ you in certain jobs where you may be required to come to work on short notice.

The City of Medina does not discriminate on the basis of race, color, religion, creed, national origin, age, sex, disability, marital status, sexual orientation, status with regard to public assistance, membership in a local commission, or any other legally protected status in its hiring or employment practices.





## Supplemental Application

**Applicant Name:** \_\_\_\_\_

**INSTRUCTIONS:** Please review and complete each section on the Supplemental Application. Your responses to the Supplemental Application are used to evaluate your qualifications for the position. Failure to complete the Supplemental Application may limit our ability to evaluate your application.

**NOTICE TO APPLICANT:** Information requested on your application that is defined by State Statute as public may be released on request and includes job history, education and training, relevant test scores, rank on our eligibility list, Veteran's status, and work availability. Your name is private until you are certified as eligible for appointment to a position or are considered by the appointing authority to be a finalist for a position in public employment. Certain other information is private and may be released only to you or to governmental entities authorized access by law. Private data contained in this application:

**Name/Social Security Number (SSN):** Used to identify you in relation to other applicants. You are legally required to provide your name, but not your SSN. Failure to provide this information may result in a delay in processing or rejection of your application.

**License Information:** Used to certify applicants for positions where State law requires appropriate license. You are legally required to provide this information. Failure to provide this information may result in rejection of your application.

**Social Security Number (Optional):** \_\_\_\_\_

### DRIVER'S LICENSE/RECORD

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Class: \_\_\_\_\_ A \_\_\_\_\_ B \_\_\_\_\_ D \_\_\_\_\_ CDL

List any endorsements: \_\_\_\_\_

Do you have a clean driving record? \_\_\_\_\_ Yes \_\_\_\_\_ No If no, please explain: \_\_\_\_\_

**CONVICTION INFORMATION:** No person shall be disqualified from public employment solely or in part because of prior conviction of a crime or crimes, unless the crime or crimes for which convicted directly relate to the position of employment sought. In determining the effect of a conviction, the City shall consider the requirements of Minnesota Statutes, Chapter 364. Applicants who are finalists for certain positions will be subject to a criminal background investigation.

*I hereby give my consent for a personal background investigation, to include a criminal history check, DVS (Driver & Vehicle Services) check, and reference checks, if I become a finalist for this position.*

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FAIR CREDIT REPORTING ACT DISCLOSURE:** In connection with your application for employment, an investigation may be made in which “consumer reports” are obtained from a consumer reporting agency. Such reports may include information concerning your credit worthiness, credit capacity, character, general reputation, personal characteristics, or mode of living. Examples of such reports include, but are not limited to: your credit history and a criminal background check. Upon written request, you will be provided with a disclosure of the nature and scope of the consumer report.

The City of Medina will not use the information contained in the consumer report and/or investigative consumer report in violation of any applicable federal or state law or regulation.

If any consumer reports and/or investigative consumer reports indicate that any adverse action should be taken, including the denial of your application for employment, you will be provided with a copy of the report(s) and the “Summary of Your Rights Under the Fair Credit Reporting Act” per the Fair Credit Reporting Act.

The information contained herein is considered private data and will be used only to determine your suitability for employment. Providing this information is strictly voluntary and you are not required by law to furnish any of the information requested herein. However, if you do not furnish it we may have difficulty determining your suitability for employment. The information provided herein will be accessible only to you, appropriate staff of the City of Medina, or as provided for by Minnesota Statutes. By law, I understand that I have the right to receive a free copy of my consumer report and/or investigative consumer report from the consumer reporting agency if one is obtained, upon my written request for this information.

I hereby authorize the City of Medina to obtain “consumer reports” and/or “investigative consumer reports” in connection with processing my application for employment. I further authorize the appropriate individuals, companies, institutions or agencies, including consumer reporting agencies, to release this information.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### APPLICANT’S STATEMENT

I certify that I have read the “Notice to Applicant” regarding the MN Data Practices Act, and understand my rights as a subject of data. I hereby release the City of Medina, with which I am seeking employment, from any liability which may result from releasing information requested.

I understand that if offered a position, I may be required to submit to and pass a drug screen.

I hereby certify that all answers contained in this supplemental application are true and I agree and understand that any misrepresentation or omission of facts contained in this application will be grounds for disqualification for employment or in the event of employment, dismissal from employment upon discovery of the information.

By signing this form I hereby acknowledge I have read and understood the above statements. *Failure to sign this form may result in rejection of your application.*

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**Election of Veteran's Preference Form**  
**(Minnesota Statute 43A.11)**

Name: \_\_\_\_\_  
(Please Print)

Are you eligible to claim veteran's preference?

Yes       No (if "no" is marked, please stop here)

Do you wish to claim veteran's preference if you achieve a passing score?

Yes       No

If yes, please check the preference you are claiming:

Veteran – defined as a U.S. citizen or resident alien who separated under honorable conditions, and  
1. has served on active duty for at least 181 consecutive days, or  
2. was discharged by reason of disability incurred while on active duty, or  
3. has met active duty requirements as defined by the Code of Federal Regulations, or  
4. has active military service certified under section 401, Public Law Number 95-202  
In addition, you cannot be currently receiving a monthly veteran's pension based exclusively on length of service. **Attach a copy of your DD214 in order to receive 10 points.**

Disabled Veteran – defined as a veteran having a compensable service connected disability as adjudicated by the U.S. Veterans Administration or the retirement board of one of the branches of the Armed Forces, which disability is currently existing. (Attach a copy of your DD214 and FL 802 (or an equivalent letter from a service retirement board) to receive 15 points.

Spouse of a deceased veteran. Attach a copy of your marriage certificate, the veteran's DD214 and the death certificate to receive 10 points.

Spouse of a disabled veteran who is unable to use preference due to disability. Attach a copy of your marriage certificate, the veteran's DD214 and FL802 (or an equivalent letter from a service retirement board) to receive 15 points.

**AFFIDAVIT:**

I hereby claim veteran's preference for this vacancy and certify that all the information given is true, complete, and the best of my knowledge.

I hereby authorize the Veteran's Administration to release information necessary to process this application to the City of Medina.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

## Supplemental Application Finance Director

**Please note:** This supplemental form will be used to rank applicants, so please be complete and accurate in your responses. Do not respond “see resume”. Incomplete responses, false statements, omissions, or partial information may result in disqualification from the selection process.

1. Do you possess a valid Driver’s License? (*choose one*)      **YES**              **NO**
  
2. List your education and degrees held (only list completed degrees):  

College/University Name	Degree Achieved
-------------------------	-----------------
  
  
  
  
  
  
  
  
  
  
4. Which level best describes your progressively responsible years of experience in the field of accounting and finance?
  - No experience
  - Less than 1 year
  - 1 -3 years
  - 3-5 years
  - 5-7 years
  - 7-9 years
  - 9+ years
  
  
  
  
  
  
  
  
  
  
5. Do you have governmental accounting experience? If yes, what organization(s) did you get this experience with? What were your main areas of responsibility



6. Which of the following best describes your experience supervising staff? By supervising staff we mean, hiring staff, training, setting goals and expectations, conducting performance reviews, correcting work performance, etc. Years of experience should be full-time equivalent.
- No experience
  - Less than 1 year
  - 2 years
  - 3 years
  - 4 years
  - 5+ years
7. If you marked supervisory experience above, please list how many people you supervised. What was your job title? What organization(s) did you get this experience with?
8. Have you served in a leadership role? If yes, what organization(s) did you get this experience with? What were your main areas of responsibility?
9. Which of the below best describes your skill level using Microsoft Office Excel? Be prepared to explain your answer if selected for an interview
- No experience
  - Beginner: I use it every now and again
  - Intermediate: I use it daily for work, create documents/formulas
  - Advanced: I assist/teach others as part of my work duties, create complex documents/formulas and pivot tables



10. Please explain your experience with municipal budgets, Financial Reports, Generally Accepted Accounting Principles (GAAP) and Governmental Accounting Standard Board (GASB).
  
11. Please explain your experience preparing the following financial documents: Balance Sheets, Income Statements, Cash Flow Statements, Comprehensive Annual Financial Reports (ACFR).
  
12. Please list experience in other municipal finance operations (investments, TIF, long-term planning, capital improvements planning, etc.)
  
13. Please list financial software or ERP systems experience.
  
14. Please list any relevant licenses or certifications.



I hereby certify that all answers contained in this application are true and I agree and understand that any misrepresentation or omission of facts contained in my application for employment or this addendum will be grounds for disqualification for employment, or in the event of employment, immediate dismissal from employment upon later discovery of any omission of facts or misrepresentations.

I further understand that if offered a position, I must submit to and pass a criminal background check and employment reference checks.

By my signature on this form, I hereby acknowledge that I have read and understood the above statements. **Failure to sign application forms may result in rejection of your application.**

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_