

Position applying for:	
SUPPLE WAS UPPER	8
EMPLOYEE INFORMATION	

Name:	11112				
Last	First				
Telephone:	= = = = = = = = = = = = = = = = = =	Al:	ternate telephone:		
Address:					
Are you able to perform the essential functions of the position with or without accommodations? Yes No If necessary for the job are you older than: 18 19 21 (Check one) I am legally eligible for employment in the U.S.? Yes No I am seeking a permanent position: Yes No		If necessary for the job, I am able to: Work overtime?			
I will be able to report to days after being n	otified I am hired.	IDI OVMENT HICTORY			
	rst. Include summer or ten	PLOYMENT HISTORY nporary jobs. Be sure all your experient sheet of paper if necessary. No more			
Employer name and address	: Position title/duties,	skills:	Start date:	End date:	
Pay: \$			Reason for I	leaving:	
Per:	Supervisor:	Telephone:			
Employer name and address	: Position title/duties,	Position title/duties, skills:		End date:	
Pay: \$			Reason for I	Reason for leaving:	
Per:	Supervisor:	Telephone:			
Employer name and address	Position title/duties,	Position title/duties, skills:		End date:	
Pay: _\$			Reason for I	leaving:	
Per:	Supervisor:	Telephone:	1922W - 61 W 34	DELLIN OURSE	
Employer name and address	Position title/duties,	skills:	Start date:	End date:	
Notice Office			Reason for I	leaving:	
Pay: _\$		Topod Instantones			
Per:	Supervisor:	Telephone:	-		

Summarize other employment related to this job: **EDUCATION** Years Institution name Field of study Graduate or degree completed High school College/university Business/technical Additional **MILITARY** ☐ No ☐ Yes Are you a veteran? Duty/specialized training: **SKILLS & QUALIFICATIONS** Other qualifications such as special skills, abilities or honors that should be considered: Types of computers, software, and other equipment you are qualified to operate or repair: Professional licenses, certifications or registrations: Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employer's attention: Typing speed: per minute REFERENCES List two personal references who are not relatives or former supervisors. Name Address Telephone Occupation Years known Telephone Name Address Occupation Years known CONTACT In case of accident or illness, please contact: Name: Daytime phone: Relationship: Address: INFORMATION TO THE APPLICANT As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references. If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.

Signature of Applicant

Date

Equal Employment Opportunity: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

Developed at employer request by the Alaska Department of Labor & Workforce Development, Employment Security Division.