



10,000 years in our Traditional Homeland, Prince William Sound, the Copper River Delta, and the Gulf of Alaska

EMPLOYMENT APPLICATION

_____ Position Applying For

PERSONAL INFORMATION

Name: _____
Last First MI
Telephone: _____ Email: _____
Mailing address: _____
Are you known by any other name? Yes No Other name(s): _____
Are you Alaska Native? Yes No Do you have a C.I.B? Yes No
If yes, list your tribe of origin: _____
Are you legally eligible for employment in the United States? Yes No
Are you a veteran? Yes No Branch of Service _____
Type of Discharge: _____
Will you accept a position requiring travel? Yes No
Type of travel available for: Continuous Frequent Occasional Remote Areas
Will you accept a position requiring weekend work? Yes No
Type of position seeking: Full Time Part Time Seasonal Temporary As Needed
Date you are available to begin work: _____

EDUCATION

High school name: _____
Number of years completed: _____ Diploma: Yes No GED: Yes No
City: _____ State: _____
College and/or vocational school name: _____
Number of years completed: _____ Major: _____
Degrees earned: _____ City: _____ State: _____
Graduate/Professional school name: _____
Number of years completed: _____ Major: _____
Degrees earned: _____ City: _____ State: _____



Other training/degrees/certificates: _____

Course: _____ City: _____ State: _____

Degree or certificate earned: _____

EMPLOYMENT HISTORY

If currently employed, may we contact your employer? Yes No

Employer:	Employment Dates		Work Performed:
Address:	From:	To:	
	Hourly Rate/Salary		
Telephone:	Starting:	Final:	
Job Title:			
Supervisor:	Supervisor Telephone:		
Reason for leaving:			

Employer:	Employment Dates		Work Performed:
Address:	From:	To:	
	Hourly Rate/Salary		
Telephone:	Starting:	Final:	
Job Title:			
Supervisor:	Supervisor Telephone:		
Reason for leaving:			

Employer:	Employment Dates		Work Performed:
Address:	From:	To:	
	Hourly Rate/Salary		
Telephone:	Starting:	Final:	
Job Title:			
Supervisor:	Supervisor Telephone:		
Reason for leaving:			

Use additional pages or attach resume to describe the last 10 years of employment and other relevant experience.



PROFESSIONAL LICENSE or MEMBERSHIP

Membership in professional association: _____
Type of license held: _____ State: _____
Expiration date: _____ License number: _____

SKILLS AND QUALIFICATIONS

Office machines experienced in: _____
Software: _____
Mechanical equipment or machinery you are qualified to operate and/or repair: _____
Other qualifications such as special skills, other languages or other information relevant to the position: _____

REFERENCES

List one character reference and three professional references who are not related to you that have knowledge of your professional qualifications, ethics, competence, experience and ability.

Name	Professional/ Character	Address	Telephone	Occupation	Years Known

Please feel free to attach relevant letters of reference.



CRIMINAL HISTORY

Have you ever been convicted of a felony? Yes No

If yes, identify the date of conviction, where the charges were determined, the nature of the charge and case number: _____

Have you ever been convicted of a misdemeanor involving violence, minors under the age of 18, or weapons? Yes No

If yes, identify the date of conviction, where the charges were determined, the nature of the charge and case number: _____

Answer the following if the position applied for is a child contact position subject to the Indian Child Protection and Family Violence Protection Act:

Have you ever been arrested or charged in connection with sexual abuse or sexual assault of a minor or adult? Yes No

If yes, identify the date of conviction, where the charges were determined, the nature of the charge and case number: _____

CERTIFICATION AND AUTHORIZATION

I _____ certify the information provided on this application is correct and accurate. In order to be considered for employment, I authorize Native Village of Eyak to investigate the information provided and my background, including criminal and credit checks.

Applicant Signature

Date