

KOKHANOK VILLAGE COUNCIL

APPLICATION OF EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Name: _____ Date: _____

Address: _____

Telephone number: _____ Social Security Number: _____

Position applied for: _____

If you are under 18 years of age, can you provide required proof of eligibility to work? Yes / No _____

Have you ever filed an application with us before? Yes / No _____

If yes, give date: _____

Have you ever been employed with us before? Yes / No _____

If yes, give date: _____

Are you currently employed? Yes / No _____

May we contact your current employer? Yes / No _____

Are you prevented from lawfully becoming employed in this country? Yes / No _____

On what date would you be available for work? _____

Are you available to work: Full time _____ Part time _____ Shift work _____ Temporary _____

Are you currently on "Lay-Off" status & subject to recall? Yes / No _____

Can you travel if job requires it? Yes / No _____

Have you been convicted of a felony within the last 7 years? Yes / No _____

If yes, please explain _____

EDUCATION:

Do you have a high school diploma or GED? Yes / No _____

Please describe certificates or degrees you have – what they are, where they are from and when you got them:

REFERENCES: List below the names of three persons not related to you, whom you have known for at least one year.

Name: _____ Title/Relationship: _____ Contact Number: _____

Name: _____ Title/Relationship: _____ Contact Number: _____

Name: _____ Title/Relationship: _____ Contact Number: _____

SKILLS AND QUALIFICATIONS: Summarize special skills and qualifications acquired from employment or other experience

EMPLOYMENT

Please provide the following information for your past and current employers, assignments or volunteer activities, starting with the most recent. Use additional sheets if necessary. Explain any gaps in employment in comments section below.

Employer: _____ Contact Number: _____
Address: _____ Date employed: _____
Job Title: _____ Hourly rate salary: _____
Immediate supervisor & title: _____ Reason for leaving: _____

Summarize the type of duties performed and job responsibilities:

May we contact for reference? _____

Employer: _____ Contact Number: _____
Address: _____ Date employed: _____
Job Title: _____ Hourly rate salary: _____
Immediate supervisor & title: _____ Reason for leaving: _____

Summarize the type of duties performed and job responsibilities:

May we contact for reference? _____

Employer: _____ Contact Number: _____
Address: _____ Date employed: _____
Job Title: _____ Hourly rate salary: _____
Immediate supervisor & title: _____ Reason for leaving: _____

Summarize the type of duties performed and job responsibilities:

May we contact for reference? _____

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer’s service when it is discovered.

I expressly authorize without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This applicant is current for only 30 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by the employer’s president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of applicant: _____

Date: _____

KOKHANOK VILLAGE COUNCIL

PO Box 1007

Kokhanok, AK 99606

Tel. no. 907-282-2202 or Fax 907-282-2264

WAIVER AND AUTHORIZATION TO RELEASE INFORMATION

I authorize you to furnish the Kokhanok Village Council with any and all information that you have concerning my work/employment records and me. Information on a confidential or privileged nature may be included. Your reply will be used to assist in determining my qualifications for the position I am seeking. I further understand that the information you furnish will not be disclosed to any person not connected with the Kokhanok Village Council's hiring practices, including myself.

I understand my rights under Title 5, United States Code, Section 552A, the Privacy Act of 1974, and waive those rights with the understanding that information furnished will be used by the Kokhanok Village Council and retained by them in confidence.

I hereby release you, your organization and others from any liability or damage, which may result from furnishing the information requested.

Applicant's Printed Name

Applicant's Signature

Date

*A photocopy of this request shall be for all intents and purposes as valid as the original.
You may retain this form in your files.*