

Bristol Bay Housing Authority
 PO Box 50
 Dillingham, AK 99576
 (907)842-5956 phone (907)842-2784 fax

EMPLOYMENT APPLICATION FOR OFFICE POSITIONS

Please use typewriter or ink pen.

Position Being Applied For: _____ Salary Expected: _____

Name: _____ Social Security No.: _____
Last First Middle

Address: _____ Home Phone Number: _____
Street and/or PO Box

_____ eMail Address: _____
City State Zip Code

Have you been convicted of a misdemeanor in the past five years or a felony in the past ten years?:
 yes no if "Yes" explain: _____

Do you have a valid Alaska Driver's License?: yes no License No.: _____

If hired, when can you report for work?: _____

Education and Experience:

Circle Highest Year of School Completed: 1 2 3 4 5 6 7 8 9 10 11 12

Name and Address of School Last Attended: _____

Date Last Attended: _____ High School Graduate?: _____

High School Equivalency (GED)?: yes no Certificate Date & Number: _____

List any high school courses taken that relate to the position you are applying for: _____

Education or Training after High School:

Name & Location	Dates Attended	No. of		Other Graduate?	Degree & Year	Major or Subject
		Qtr. Hrs.	Sem. Hrs.			

List Types of Electronic or Mechanical Equipment or Machines that you are qualified to operate:

Operate: _____ Repair: _____

Employment History: Include all jobs within past five years. Give earlier job history if pertinent to job applied for. Include any period of unemployment over three months in length. Use additional pages if needed to give complete history. Start with last or present position and work backwards.

Employer: _____	From: _____ To: _____
Employer Address: _____	Hours Per Week: _____
_____	Starting Salary: _____ per _____
Job Title: _____	Final Salary: _____ per _____
Duties: _____	No. Employees Supervised: _____
_____	Supervisor: _____
_____	May We Contact This Employer: _____
Reason for Leaving: _____	

Employer: _____	From: _____ To: _____
Employer Address: _____	Hours Per Week: _____
_____	Starting Salary: _____ per _____
Job Title: _____	Final Salary: _____ per _____
Duties: _____	No. Employees Supervised: _____
_____	Supervisor: _____
_____	May We Contact This Employer: _____
Reason for Leaving: _____	

Employer: _____	From: _____ To: _____
Employer Address: _____	Hours Per Week: _____
_____	Starting Salary: _____ per _____
Job Title: _____	Final Salary: _____ per _____
Duties: _____	No. Employees Supervised: _____
_____	Supervisor: _____
_____	May We Contact This Employer: _____
Reason for Leaving: _____	

Employer: _____	From: _____ To: _____
Employer Address: _____	Hours Per Week: _____
_____	Starting Salary: _____ per _____
Job Title: _____	Final Salary: _____ per _____
Duties: _____	No. Employees Supervised: _____
_____	Supervisor: _____
_____	May We Contact This Employer: _____
Reason for Leaving: _____	

If you claim Native preference, it may be necessary to provide the Bristol Bay Housing Authority with documentation of your ethnic background. Please indicate below your ethnic background if you claim Native preference.

Alaska Native

American Indian

READ CAREFULLY BEFORE SIGNING BELOW:

In consideration of my employment, I agree to conform to the rules and regulations of the company and further agree that my employment and compensation may be terminated at any time, with or without cause or notice, at the option of either Bristol Bay Housing Authority or myself. I understand and agree that I am employed at will and that my employment may be terminated at any time by the company without liability for lost wages.

I hereby certify that all information made on or in connection with this application is true and complete to the best of my knowledge and belief and that I have not knowingly withheld any fact or circumstance. I understand that any misrepresentation or concealment of material fact will be sufficient ground for the rejection of this application or removal from employment. I authorize my present and previous employers to release to the Bristol Bay Housing Authority any information they may have regarding my character or my employment record and I hereby release said employers from any damage or claim for furnishing said information. I hereby agree to submit to such physical and/or mental examination as may be required.

Applicant's Signature

Date

Waiver and Authorization to Release Information

I authorize you to furnish the Bristol Bay Housing Authority with any and all information that you have concerning me and my work/employment records. Information of 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 or organization not connected with Bristol Bay Housing Authority'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 Bristol Bay Housing Authority and retained by them in confidence.

By signing this form I also authorize Bristol Bay Housing Authority to have access to my criminal records, if any.

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

Applicant's Printed Name

Social Security Number

Driver's License Number

Applicant's Signature

Date