



City of Nuiqsut

P.O. Box 89148

Nuiqsut, Alaska 99789

APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer

The City of Nuiqsut is an Equal Opportunity Employer. We do not discriminate on the basis of race, color, religion, national origin, sex, age, or disability. It is our intention that all qualified applicants be given equal opportunity and that selection be based on job-related factors.

Today's Date _____

Last Name First Name M.I.

Present Address/PO Box# City State Zip Code

Social Security Number Telephone Numbers

Position Desired _____

Have you ever been employed by the City of Nuiqsut? Yes _____ No _____

If the answer is yes, when were you employed? _____

Do you hold a valid driver's license? (if so provide state, number, and expiration date)

Please list your professional licenses, certificates or registrations

Have you ever been convicted of breaking any law? Yes _____ No _____

If the answer is yes, please provide details _____

Are you now, or do you expect to be engaged in any other business or employment?
(if yes, please explain)

EDUCATION

High School

Name of High School _____

Location of High School _____

Highest High School Grade completed _____

College or University

Name of Institution _____

Location of Institution _____

Number of years completed (to the nearest half-year) _____

Degree Granted _____

Date Degree Conferred _____

Name of Institution _____

Location of Institution _____

Number of years completed (to the nearest half-year) _____

Degree Granted _____

Date Degree Conferred _____

Name of Institution _____

Location of Institution _____

Number of years completed (to the nearest half-year) _____

Degree Granted _____

Date Degree Conferred _____

WORK HISTORY

Job Title _____

Employer Name _____

Employer Address _____

Supervisor's Name _____

Supervisor's Telephone Number _____

Duties _____

Employment Period - From (date) _____ to _____

Reason for Leaving _____

Beginning Rate of Pay _____ End Rate of Pay _____

Job Title _____

Employer Name _____

Employer Address _____

Supervisor's Name _____

Supervisor's Telephone Number _____

Duties _____

Employment Period - From (date) _____ to _____

Reason for Leaving _____

Beginning Rate of Pay _____ End Rate of Pay _____

Job Title _____

Employer Name _____

Employer Address _____

Supervisor's Name _____

Supervisor's Telephone Number _____

Duties _____

Employment Period - From (date) _____ to _____

Reason for Leaving _____

Beginning Rate of Pay _____ End Rate of Pay _____

Job Title _____

Employer Name _____

Employer Address _____

Supervisor's Name _____

Supervisor's Telephone Number _____

Duties _____

Employment Period - From (date) _____ to _____

Reason for Leaving _____

Beginning Rate of Pay _____ End Rate of Pay _____

REFERENCES

Please provide at least three character references that were not former employers.

Name _____

Address _____

Telephone Number _____

E-mail _____

Name _____

Address _____

Telephone Number _____

E-mail _____

Name _____

Address _____

Telephone Number _____

E-mail _____

Name _____

Address _____

Telephone Number _____

E-mail _____

APPLICANT STATEMENT

The information provided in this employment application is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in dismissal. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This authorization includes permission to check employment 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 of America, have a physical examination and/or drug test, or sign a conflict of interest agreement and abide by its terms.

I understand that acceptance of an offer of employment does not create a contractual obligation for or permanent employment with the City of Nuiqsut. Employment may be terminated at any time at the option of the employee or City of Nuiqsut.

I understand and agree to the information shown above.

Applicant Signature

Date