Chevak Traditional Council
P.O. Box 140 | 200 Aurora Street
Chevak, Alaska 99563
info@chevaktc.gov | www.chevaktc.gov

EMPLOYMENT APPLICATION

Position applying for		Date You Can Start	

PERSONAL INFORMATION			
Full Name		Date of Birth	
Address		SSN #	
City, State, Zip		Driver's License # (if required for the job)	
Phone		Email	

Were you employed here before? ☐ Yes ☐ No If yes, when? ________

Are you legally eligible for employment in this country? ☐ Yes ☐ No

Type of employment desired: ☐ Full Time ☐ Part Time ☐ Temporary ☐ Seasonal

Have you been convicted of a felony in the last 7 years? ☐ Yes ☐ No

If yes, please explain:

EDUCATION BACKGROUND		
NAME OF SCHOOL	YEARS COMPLETED	DEGREE / DIPLOMA

EMPLOYMENT HISTORY						
Employer			Address			
Job Title			Dates from		to	
Supervisor			Starting Salary		per	☐ hr ☐ year
May we contact for reference?		☐ Yes ☐ No	Ending Salary		per	☐ hr ☐ year

Employer			Address			
Job Title			Dates from		to	
Supervisor			Starting Salary		per	☐ hr ☐ year
May we contact for reference?		☐ Yes ☐ No	Ending Salary		per	☐ hr ☐ year

Employer			Address			
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Supervisor			Starting Salary		per	☐ hr ☐ year
May we contact for reference?		☐ Yes ☐ No	Ending Salary		per	☐ hr ☐ year

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List any information you would like us to consider	

List professional, trade, or business associations and any offices held. (exclude memberships that would reveal sex, race, religion, national origin, age, ancestry, or other protected status)	
ORGANIZATION	OFFICE HELD

REFERENCES		
NAME	PHONE	EMPLOYER

ACKNOWLEDGMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in an employment decision. I understand that this application is not a contract of employment. In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge.

Signature _____ Date _____

Revised 11/2025