

Connecting Ties, Inc.
Employment Application
 (907) 835-3274



Position Applied for:	PT <input type="checkbox"/> FT <input type="checkbox"/>	Social Security #	
Telephone Number:		Driver License #	Date:

Name:

Last First M.I. Email Address

Street Address/ PO Box City State Zip

Are you legally eligible for employment in the U.S.?

Yes No

I am seeking a permanent position: Yes No

I am seeking temporary work until: (date) _____

If necessary for the job I am able to work:

Dayshifts Evening shifts 24 hour shifts

Overtime? Yes No

Provide a valid Alaska Driver License Auto Insurance

Yes No Yes No

Are you able to perform the essential functions of the position with or without accommodation?

Yes No

I WILL REPORT TO WORK _____ DAYS AFTER BEING NOTIFIED THAT I AM HIRED.

EDUCATION	School Name/ Location	Yrs. Completed	Field of Study	Graduate/Degree
High School				
College/University				
Business/Technical				
Other				

Military Service: Yes No

Duty/Specialized Training:

REFERENCES: List two personal references who are not relatives or former supervisors.

Name	Address / Telephone	Occupation	Years Known

EMPLOYMENT: List last employment first. Include summer or temporary jobs. Be sure all your experience or employment related to this job are listed here. Use an extra sheet of paper (if necessary), and

(Attach Resume)

Employer Name and Address Fax# Phone#	Position Title:		Dates Employed	
	Duties:		From	To
	Supervisor	Telephone	Salary	
			Reason for leaving	
Employer Name and Address Fax# Phone#	Position Title:		Dates Employed	
	Duties:		From	To
	Supervisor	Telephone	Salary	
			Reason for leaving	
Employer Name and Address Fax# Phone#	Position Title:		Dates Employed	
	Duties:		From	To
	Supervisor	Telephone	Salary	
			Reason for leaving	
Employer Name and Address Fax# Phone#	Position Title:		Dates Employed	
	Duties:		From	To
	Supervisor's Name	Telephone	Salary	
			Reason for leaving	

Summarize other employment related to this job: _____

Types of computers, other electronic or mechanical equipment you are qualified to operate or repair: _____

Typing Speed: _____

Professional Licenses, Certifications or Registrations: _____

Additional skills including supervision skills, other languages, or information regarding the career/occupation you wish to bring to the employer's attention: _____

In case of accident or illness, please contact:

Name: _____ Daytime Phone: _____

Address: _____ Relationship: _____

Information to the applicant: As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the U.S., have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms.

I understand and agree to the information shown above:

Signature: _____ **Date:** _____

Equal Employment Opportunity: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no effect on your application for employment.
8/20/15CTI