

COMPANY OR EMPLOYER NAME:

POSITION APPLIED FOR:

APPLICANT TELEPHONE:

***Employment Application sociais***

SOCIAL SECURITY NUMBER:

YOUR NAME:

Last

ADDRESS:

Dres

No

First

Middle ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.A.?

Yes No (If yes, verification will be required.) I AM SEEKING A PERMANENT POSITION: IF NECESSARY FOR THE JOB I AM ABLE TO:

Work (which shifts)? Select: Work overtime? Select: Provide a valid Alaska Drivers License ? Select:

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

Yes No

19\_

21\_

**IF NECESSARY FOR THE JOB, ARE YOU OVER (Please mark one) 14\_ 15\_ 16\_ 18\_ I WILL BE ABLE TO REPORT TO WORK DAYS AFTER BEING NOTIFIED THAT I AM HIRED.**

**EDUCATION:**

Yrs. Completed

Field of Study

Graduate or Degree

High School College/University Business/Technical

Other (May include grammar school)

**MILITARY SERVICE:**

MILITARY SERVICE:

**Yes**

Yes

No

Duty/Specialized Training:

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

Name

Address

Telephone

Occupation

Years known

Name

Address

Telephone

Occupation

Years known

**EMPLOYMENT:**

List last employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary (following this section), or use an extra sheet of paper if necessary.

Employer Name and Address

Position Title/Duties Skills

Dates Employed from

to

Reason for leaving

Supervisor's Name:

Telephone:

Employer Name and Address

Position Title/Duties Skills

Dates Employed from

to

Reason for leaving

Supervisor's Name:

Telephone:

Developed at employer request by the Alaska Department of Labor and Workforce Development, Employment Security Division

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