

NORTHWEST ARCTIC BOROUGH SCHOOL DISTRICT

P.O. Box 51
Kotzebue, Alaska 99752
Phone (907) 442-1808 Fax (907) 442-2172

AN AFFIRMATIVE ACTION, EQUAL OPPORTUNITY EMPLOYER

CLASSIFIED
APPLICATION FOR EMPLOYMENT

NAME _____ DATE _____
(Last) (First) (Middle I.)

MAIDEN NAME: _____ HOME PHONE _____
CELL PHONE _____

MAILING ADDRESS: _____

HOME ADDRESS: _____

(City) (State) (Zip Code)

DAYTIME CONTACT TELEPHONE(S) _____ CONTACT PERSON _____
_____ CONTACT PERSON _____

1. POSITION APPLIED FOR: **Note:** A separate application will be needed for each position which has a job description with decidedly different job specifications. Applications are kept on file for one year. A new application with up-dated information will be necessary after this date.

DATE _____ POSITION TITLE _____ LOCATION _____
DATE _____ POSITION TITLE _____ LOCATION _____
DATE _____ POSITION TITLE _____ LOCATION _____

2. EDUCATION, TRAINING, AND EXPERIENCE:

A. Elementary and High School:

State the highest year or grade level of high school completed: _____

Do you have a HS diploma, GED, or equivalent? _____ YES _____ NO

Date of last attendance _____ Name and address of last school attended _____

High School Name Location Dates Attended Diploma GED Graduation
(City and State) (MO/day/YR) Year earned Year earned Date

B. Post-Secondary Education/Training:

Trade or Technical Schools

Name of School Trade/Technical School	Location City/State	Dates attended (Mo/Day/Yr) From / To	Course Completed	Diploma/Certificate Completed (Mo/Day/Yr)
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University or Colleges

Name of College Or University	Location City/State	Dates attended (Mo/Day/Yr) From / To	Credits Qtr. Sem.	Degree/Major Completed (Mo/Day/Yr)
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Total semester hours earned since most recent degree _____ (Quarter hour equals 2/3 semester hour)

3. EMPLOYMENT HISTORY: 1. Include all jobs held within the past five years, especially any jobs that have a relationship to the job applied for. 2. Start with your present or last job and work backwards. 3. Include any period of unemployment over three months. (USE EXTRA PAGES IF NECESSARY.)

PRESENT OR LAST JOB:

1. Employing Firm: _____ Dates Worked: (From) _____ (To) _____
Complete Address: _____ Supervisor's Name: _____ Phone: _____
Job Title: _____ Hours Worked Per Week: _____ Job Duties _____
Number of Employees You Supervised: _____
Reason for Leaving: _____

2. Employing Firm: _____ Dates Worked: (From) _____ (To) _____
Complete Address: _____ Supervisor's Name _____ Phone: _____
Job Title: _____ Hours Worked Per Week: _____ Job Duties _____
Number of Employees You Supervised: _____
Reason for Leaving: _____

3. Employing Firm: _____ Dates Worked: (From) _____ (To) _____
Complete Address: _____ Supervisor's Name: _____ Phone: _____
Job Title: _____ Hours Worked Per Week: _____ Job Duties _____
Number of Employees You Supervised: _____
Reason for Leaving: _____

4. ADDITIONAL INFORMATION

A. Have you ever been convicted of a crime (misdemeanor or felony)? **Warning:** All convictions, old or new must be included. If the court case is closed and you were convicted of a crime, you still must report it here.

_____ no _____ yes If yes, give date, crime, place of conviction and sentence received.

B. Have you ever plead guilty or entered a plea of *nolo contendere* to a crime (misdemeanor or felony) with the conviction being deferred, or otherwise deleted so it does not appear on your record?

_____ no _____ yes If yes, please explain.

CONVICTION OF A CRIME, DEFERRED ADJUDICATION OR IMPOSITION OF PROBATION IS NOT AN AUTOMATIC BAR TO EMPLOYMENT. THE DISTRICT WILL CONSIDER THE NATURE OF THE OFFENSE, THE DATE OF THE OFFENSE, AND THE RELATIONSHIP BETWEEN THE OFFENSE AND THE POSITION FOR WHICH YOU ARE APPLYING.

5. CERTIFICATION OF APPLICANT:

I hereby certify that all the 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 rejection of application or termination of employment.

I authorize my present and previous employers to release to the Northwest Arctic Borough School District any information they may have regarding my character or my employment record, and 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.

Signature of Applicant

Date

**AN AFFIRMATIVE ACTION-EQUAL OPPORTUNITY EMPLOYER
APPLICATIONS FROM MINORITIES ARE ENCOURAGED**

PRINT: _____

SUBMIT: _____