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| **Application for Employment**EMMONAK OFFICE ANCHORAGE OFFICEPO Box 210 2909 Arctic Blvd.Emmonak, AK 99581 Anchorage, AK 99503 | Office Use onlyReceived Date |
| Hired Date |  |
|  |
| Last Name | First | Middle | Date |
| Mailing Address | Phone Number #1 |
| City | State | Zip Code | Phone Number #2 |
| *If you have a prepaid cell phone with GCI, please list another contact number as we cannot call to those phones from a land line. Thank you.* |

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, marital or veteran status, gender, or any other legally protected status.

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Can you Work? Full Time \_

Part Time

Overtime

Weekends \_

Evenings \_

Have you worked for YDFDA before? YES \_ \_ NO

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Date of Birth -

Years Locations Positions

Date Available for Work

Rate of Pay Expected

Position(s) Applied For

Please list licenses, certification, or degrees you may have:

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| **QUALIFICATIONS** Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training. |
|  | School Name | Degree | Address/City/State |
| High School |  |  |  |
| College |  |  |  |
| Other |  |  |  |
| **SPECIAL SKILLS** List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc. |

**PRIOR EMPLOYMENT EXPERIENCE**

|  |  |  |
| --- | --- | --- |
| **1.** | Employer | Employed From To |
| Address | Starting Salary Ending Salary |
| Telephone Number(s) | Work Preformed |
| Job Title | Supervisor |  |
| Reason For Leaving |  |

|  |  |  |
| --- | --- | --- |
| **2.** | Employer | Employed From To |
| Address | Starting Salary Ending Salary |
| Telephone Number(s) | Work Preformed |
| Job Title | Supervisor |  |
| Reason For Leaving |  |

|  |  |  |
| --- | --- | --- |
| **3.** | Employer | Employed From To |
| Address | Starting Salary Ending Salary |
| Telephone Number(s) | Work Preformed |
| Job Title | Supervisor |  |
| Reason For Leaving |  |

If you are applying for a skilled trade position, please complete the following reference information

|  |  |  |
| --- | --- | --- |
| Reference Name | Company | Phone Number |
|  |  |  |
|  |  |  |
|  |  |  |

**EMERGENCY CONTACT**

#1 Contact

Name

Home Phone Cell Phone Work Phone

#2 Contact

Name

Home Phone Cell Phone Work Phone

# Employee Record

Have you ever been convicted of a misdemeanor in the last three(3) years; or a felony within the last seven (7) years? If yes, explain (conviction of a misdemeanor or felony is not a necessarily a bar to employment)

# CONDITIONS OF EMPLOYMENT

I acknowledge that I have been given a copy of the job description and/or have been notified of essential job duties and functions for the position for which I have applied and confirm that I am able to safely perform the same with or without a reasonable accommodation. I understand that if I believe I need a reasonable accommodation to perform any of the essential job duties or functions of the position that I must request such accommodation before I begin work and/or as soon as I realize that I need one. All requests for accommodation should be directed to YDFDA' s Hiring Manager.

The undersigned in connection with an application for employment, hereby authorizes YDFDA to investigate my criminal, educational, and employment background. This authorizes any law enforcement or judicial agency, corporation, company or others to provide relevant information they may have on me to YDFDA, and/or its authorized vendor or representative. This further releases all parties providing information from any and all liabilities or responsibility for doing so. The Undersigned hereby acknowledges that I have read or have had it read to me and I understand it. A copy of this authorization has the same authority as the original.

The facts set forth in my application for employment are true and complete. I understand that if hired, any false statements on this application shall be considered sufficient cause for dismissal. Additionally, I understand that nothing contained in this employment application, or in the granting of an interview, is intended to create an employment contract between YDFDA and me for either employment or for providing of any benefit. In the event that I am employed by YDFDA, I understand that such employment will be **AT WILL** and can be terminated at any time, with or without cause, by either me or YDFDA. I also understand that to assure safe operations of YDFDA that I will be required to submit to a drug test before being allowed to work and may be required to submit to random drug testing or reasonable cause while employed by YDFDA.

I understand that while employed at Yukon Delta Fisheries Development Association I will be required to abide by its "Zero Tolerance - Anti Drug Policy" which I have been given an opportunity to review. If I fail to do so, I understand that I can be subject to immediate termination.

If hired, I hereby agree to all terms and conditions as set forth above.

Printed Name

Employee Signature