Employment company or employer name: Application

CATHOLIC SCHOOL

433 JACKSON ST.

Position applying for: EMPLOYEE INFORMATION Name: Last First Middle Telephone: Email: Alternate telephone: Address: Are you able to perform the essential functions of If necessary for the job, I am able to: the position with or without accommodations? □ No Work overtime? ☐ Yes ☐ Yes ☐ No ☐ No If necessary for the job are you older than: If so, fill out the following: Issuing state: ☐ 14 ☐ 15 ☐ 16 (Check one) □ 19 □ 21 Passengers I am legally eligible for employment in the U.S.? Tankers ☐ Tank with Hazardous Materials ☐ No ☐ School Bus ☐ Double/Triple trailers Work the following shifts: (check all that apply) ☐ Any ☐ Day ☐ Night ☐ Swing Rotating I will be able to report to work days after being notified I am hired. ☐ Split ☐ Graveyard Other: EMPLOYMENT HISTORY List most recent 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 on an extra sheet of paper if necessary. No more than 10 years history recommended. Employer name and address: Position title/duties, skills: Start date: End date: Reason for leaving: Pay: \$ Per: Supervisor: Telephone: Employer name and address: Position title/duties, skills: Start date: End date: Reason for leaving: Pay: \$ Per: Supervisor: Telephone: Employer name and address: Position title/duties, skills: Start date: End date: Reason for leaving: Pay: \$ Per: Supervisor: Telephone: Employer name and address: Position title/duties, skills: Start date: End date: Reason for leaving: Pay:

Supervisor:

Per:

Telephone:

Summarize other employment related to this job: **EDUCATION** Years Institution name Graduate or degree Field of study completed High school College/university Business/technical Additional **MILITARY** Are you a veteran? Yes □ No Duty/specialized training: SKILLS & OUALIFICATIONS Other qualifications such as special skills, abilities or honors that should be considered: Types of computers, software, and other equipment you are qualified to operate or repair: 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: Typing speed: per minute REFERENCES List two personal references who are not relatives or former supervisors. Name Address Telephone Occupation Years known Address Telephone Occupation Years known Name CONTACT In case of accident or illness, please contact: Name: Daytime phone: Relationship: Address: 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 United States, 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 of Applicant

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 affect on your application for employment.

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

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