ALASKA FAMILY SERVICES, INC. APPLICATION FOR EMPLOYMENT

1825 S. Chugach Street, Paln	ier, Alaska 99645	Po	osition Appli	ed For:				
It is our policy to comply with race, age, color, sex, sexual on Name	rientation religion	, national or	igin, disabili	ty or other prot		sification	١.	
Mailing Address								
Stree Telephone Number	et			City Message Pho	ne			Zip
Social Security Number				-				
I am seeking a full time posit	ion: Yes	No I a	ım seeking to	emporary work	until			
If necessary for the job, can y	ou: Work Shifts?	Yes N	o Work	Overtime?	Yes	No		
Speak other Language(s)?	Yes No	Which La	nguages?					
I will be able to report for wo	rk			days after being	g notified	that I am	hired.	
Provide a valid Alaska Driver	r's License?	Yes N	o Have	you worked for	AFS befo	ore?	Yes	No
Have you ever received any s If yes when?						No		
Are you authorized to work in	n the U.S. on an u	nrestricted b	asis? Yes	No				
How did you learn of this ope	ening?							
Shift preferred	Part-T	ime		_ Full-'	Time			
Have you ever been convicted If yes, give details							No	
A "yes" answer does not auto the job for which you are app	• •		employmen	t with AFS. Th	ne Nature	of the off	fense, da	ate, and
EDUCATION			& LOCATIO SCHOOL	ON		DIPLON	MA/DE0	GREE
High School								
College/University								
College/University								
Other Training/Education								
Identify all licenses or certific Name of License/certification								
Licenses/certifications number	er		Issu					
Have your license/certification If yes, state reason for lapse,	revocation or susp	ension						
Date of reinstatement:								

Updated January 13, 2006

In addition to your work hi work with AFS?	story (reverse side),	what other exp	periences, skills	or qualifications w	ould especially fit you for	
Do you presently have any References: List three pers				•	? Yes No	
Name	Address		Occupation	Phone Numb	er Years Known	
WORK HISTORY May			yer? Yes	No		
Most Recent Employer	Addre	ess			Telephone	
Date Started	Starting Salary: \$		Per	Starting Position	n	
Date Left	Salary on Leaving: \$ Per			Position on Leaving		
Name and Title of Supervi	sor					
Description of Duties				Reason for Leavi	ng	
Previous Employer	Addre	ess			Telephone	
Date Started	Starting Salary: \$	-	Per	Starting Position	n	
Date Left	Salary on Leaving: \$ Per			Position on Leaving		
Name and Title of Supervi	sor					
Description of Duties				Reason for Leavi	ng	
Previous Employer	Addre	ess			Telephone	
Date Started	Starting Salary: \$		Per	Starting Position	n	
ate Left Salary on Leaving: \$ Per			Per	Position on Leaving		
Name and Title of Supervi	sor					
Description of Duties				Reason for Leavi	ng	

Previous Employer		Address			Telephone
					•
Date Started	Starting Salary: \$		Per	Starting Position	
Date Left	Salary on Leaving: \$		Per	Position on Leaving	
Name and Title of Supervisor	or				
-					
Description of Duties				Reason for Leavi	ing
•					

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. If necessary for employment in a specific position, you may be required to have a physical examination, to provide evidence of citizenship or date of birth, to sign a conflict of interest agreement and abide by its terms, and you may be required to pass a criminal history background check.

I understand and agree to the i	nformation shown above
Date	Applicant's Signature
EQUAL EMPLOYMENT OP	PORTUNITY: All employers are required to provide equal employment opportunity and
may ask your national origin	race and sex for planning and reporting purposes only