Employment Application



| | | | | App | lican | tintorm | ation | | | 3 0 7 | | |
|--|----------------|------------|----------------|-----------|--------|---|-------------------------|-----------------------------|---------------------|---------------------------|-------------|------|
| Full Name: | | | | | | | | | D | ate: | | |
| | Last | | | First | | | | M.I. | ===0 | | | |
| Address: | | | | | | | | | | | | |
| | Street Address | | | | | | | | | Apartn | nent/Unit # | |
| | | | | | | | | | | | | |
| | City | | | | | | | State | , | ZIP Co | ode | |
| Phone: | | | | | | Email: | | | | | | |
| | | | | | | | | | | | | |
| Alternate Phone: Position Applying For: | | | | | | | | | | | | |
| Are you a citizen of the United States? | | | | YES | NO | Are you authorized to work in the U.S.? | | | | | П | |
| I am seeking a permanent position: | | | | YES | МО | Are you of the po | able to p sition wit | erform the h or witho | essenti ut accor | ial functior nmodatior | IS YES | NO |
| Have you ever been convicted of a felony? | | | | YES | NO | If neces | | the job, ar | e you al | ble to worl | YES | NO |
| If you have I | been convi | cted of a | felony, please | expla | in: | | | | | | | |
| • | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Available sta | art date: | | | | | | | | | | 3 5 | |
| | | | | YES | NO | | | | | | | |
| Do you have a valid Alaska Driver's License? | | | | | | | | | | | | |
| If so, please fill out the following: | | | | | | | | | | | | |
| Issuing State: Type: | | | | | | | | | | | | |
| Endorsements (check all that apply): | | | | | | | | | | | | |
| Lildois | ements (or | COR all ti | at apply). | | | Tonk | with Haza | rdoue | | | Double/Tr | inle |
| Hazardous Material Passengers | | | assengers | | | | Materials | terials School Bus Trailers | | | | • |
| Check the b | ox(es) next | to the sh | ift(s) you are | able to | work | : | | | | | | |
| Any | Day | Night | Swing | Rota [| _ ~ | Split | Grave E | eyard (| Other | | | |
| | | 11-12-1-2 | | 100 | F .1. | | | | | | | LJ 2 |
| | | AL I | | | | cation | | THE IS | Control of the last | 1 -1 -7 | 05 | |
| High School: Address: | | | | | | | | | | | | |
| From: | | То: | Did y | ou gr | aduate | YES | NO | Diploma: | | | | |

| College: | | Address: | | | | |
|--|--|--------------------------|----------|--|------------------|--|
| From: | То: | Did you graduate? | YES | NO | Degree: | |
| Business/Technical: Address: | | | | | | |
| 10 | | | - | | | |
| From: | To: | Did you graduate? | YES | NO | Degree: | |
| Other/Additional: | | Addre | ess: | | | |
| From: | То: | Did you graduate? | YES | NO | Degree: | |
| THE REPORT OF | The same of the sa | Skills and Qu | ıalifica | ations | | |
| Special skills, abilities that should be considered | | | | | | |
| Types of technology, software, and other equipment you are qualified to operate or repair: | | | | | | |
| Professional licenses, certifications, or registrations: | | | | | | |
| Additional skills, including supervision skills, other languages spoken, or information regarding the career/position: | | | | | | |
| Typing speed per minute: | | | | | | |
| 98556679 | | Refere | nces | ************************************** | | |
| Please list two profe | ssional referen | ces who are not relative | | rmer su | pervisors. | |
| Full Name: | | | | Relationship: | | |
| Company: | | | | | Phone: | |
| Address: | | | | | | |
| Full Name: | | | | | Relationship: | |
| Company: Phone: | | | | | Phone: | |
| Address: | | | | | | |
| B. 15 12 11 15 | 34324 | Previous Em | ployn | nent | | |
| Company: | | | | | Phone: | |
| Address: | | | | | Supervisor: | |
| Job Title: | | Starting Sal | ary:\$ | | Ending Salary:\$ | |
| Responsibilities: | | | | | | |

| From: | To: | Reason | for Leaving:_ | |
|-----------------------------------|---|------------------|---------------|----------------|
| May we con | tact your previous supervisor for a reference? | YES | NO | |
| Company: Address: | | | | Phone: |
| Job Title: | Starting S | alary:\$ | | Ending Salary: |
| Responsibili | ties: | | | |
| From: | To: | Reason | for Leaving:_ | |
| May we con | tact your previous supervisor for a reference? | YES | NO | |
| Company: | | | | Phone: |
| Address: | | | | Supervisor: |
| Job Title: | Starting S | alary: <u>\$</u> | | Ending Salary: |
| Responsibili | ities: | | | |
| From: | To: | Reason | for Leaving:_ | |
| May we con | tact your previous supervisor for a reference? | YES | NO | |
| List any addit | ional employment on another page, and attach it to th | is form. | | |
| 元 司 由于 | Military | Service | | |
| Branch: | | | From:_ | To: |
| Rank at Disc | charge: | Туре о | f Discharge:_ | |
| If other than honorable, explain: | | | | |

Applicant's Statement

I understand that the employer follows an "at will employment" policy, in that I or the employer may terminate my employment at any time, for any reason consistent with applicable state or federal law. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment. I understand this application will be active for a period of one year; after that time, if I wish to be considered for employment, I must submit a new application.

I voluntarily authorize any present or former employer, firm, school, hospital, university, or government agency and its employees or agents to release any and all information concerning my former position to any prospective employer, or it's employees or agents, making a request for such information. I understand that the information

may include, but is not necessarily limited to, performance reports, transcripts, job descriptions, disciplinary reports and opinions regarding my suitability for the position.

I voluntarily release and hold harmless former employers, schools, hospitals or government agencies, and their employees or agents from any and all claims, liabilities, or damages arising from the disclosure or release of information or opinions concerning my professional qualifications.

I certify that all the statements herein are true and correct to the best of my knowledge and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

I agree to submit to any pre-hire testing the Kenai Peninsula Food Bank (KPFB) requires.

| | quired by the Alaska Background Check Program and pre-hire before a formal offer can be made by KPFB. (Initial) |
|----------------------|---|
| Your Name (Printed): | |
| Your Signature: | 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.

Last Revision Date: 5-15-2023