



BBEDC
 Bristol Bay Economic Development Corporation
 Box 1464
 Dillingham, Alaska 99576
 Phone 842-4370 or 1-800-478-4370 Fax 842-4336

Employment Application

Position Applying For:				
Last Name:		First Name:		Middle Initial:
Address:		City:	State:	Zip Code:
Home Phone:		Work Phone:		Email Address:

Employment History

Last or Present Employer		Nature of Business	Job Title:
Address:		Phone Number	Brief Description of Job Duties:
City	State	Zip Code	
Supervisor's Name		Phone Number	
Base Salary:	Dates Worked: From _____ To _____		Reason for Leaving:
Employer		Nature of Business	Job Title:
Address:		Phone Number	Brief Description of Job Duties:
City	State	Zip Code	
Supervisor's Name		Phone Number	
Base Salary:	Dates Worked: From _____ To _____		Reason for Leaving:
Employer		Nature of Business	Job Title:
Address:		Phone Number	Brief Description of Job Duties:
City	State	Zip Code	
Supervisor's Name		Phone Number	
Base Salary:	Dates Worked: From _____ To _____		Reason for Leaving:

Educational History

<i>School Name</i>	<i>City/State</i>	<i>Field of Study</i>	<i>Dates Attended</i>		<i>Degree</i>	<i>Graduation Date</i>
			<i>From</i>	<i>To</i>		
<i>High School</i>						
<i>Technical/Trade</i>						
<i>College</i>						
<i>Other Education or Training</i>						

Outside Activities (Exclude those indicating race, color, religion, sex, national origin, age, or handicap)

Professional Memberships: _____

Current Certificates and/or licenses: _____

Past or Present Civic or Cultural Activities – Include offices held:

Principal Hobbies: _____

Special Skills (To be completed by applicant for office/clerical work)

<i>Typing</i>	<i>Office Machines & Computers Experience</i>	<i>Years</i>
<input type="checkbox"/> YES <input type="checkbox"/> NO WPM <input type="text"/>		
<i>Dictation</i>		
<input type="checkbox"/> YES <input type="checkbox"/> NO WPM <input type="text"/>		
<i>Computer Skills</i>		
<input type="checkbox"/> Hardware <input type="checkbox"/> Software		

Please list other skills and/or equipment/language experience you have acquired:

Military History

Branch of Service: _____

From: _____

To: _____

Present Military Affiliation:

None

Reserves (active)

Reserve (inactive)

Kinds of Training and duty while in service:

Professional Work References

<i>Name</i>	<i>Title/Relationship</i>	<i>Address</i>	<i>Phone Number</i>	<i>Occupation</i>

May we contact your present employer? ***YES*** ***NO***

Wage or Salary required: _____

Date Available: _____

An Equal Opportunity Employee: We are an equal opportunity employer, and we do not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran.

Information provided on this application will not be used for any discriminatory purposes.

I hereby certify that the answers and other information on this application are true and correct and that I understand any misrepresentation or omission of facts on my part will be justification for separation from the company's service, if employed. I understand that my employment may be contingent upon receipt of an alien registration number, verification of birth, and any other pertinent information bearing upon my employment, and that my continued employment depends upon the will of the company or myself.

Signature

Date

If any of your educational or employment records are under other that the above name, please provide other names:
