

# APPLICATION FOR EMPLOYMENT

**PERSONAL**

(Please Print)

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Referred by: \_\_\_\_\_ Newspaper \_\_\_\_\_ Agency \_\_\_\_\_ Friend (their name) \_\_\_\_\_

Are you over 18 \_\_\_\_\_yes \_\_\_\_\_ no If NO a work permit will be required

Are you legally eligible for employment in the United States? \_\_\_\_\_yes \_\_\_\_\_ no

Position applied for: \_\_\_\_\_ Fulltime or Part time

Date you are available to start work: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hourly wage desired \$ \_\_\_\_\_

Have you worked for us before? \_\_\_\_\_ if YES, when \_\_\_\_\_ Position \_\_\_\_\_

Indicate special qualifications or skills: \_\_\_\_\_  
 \_\_\_\_\_

| <b>EDUCATION</b> | Name & Location | Course Studied | Years completed | Did you Graduate? |
|------------------|-----------------|----------------|-----------------|-------------------|
| Elementary       |                 |                |                 |                   |
| High School      |                 |                |                 |                   |
| College          |                 |                |                 |                   |
| Other            |                 |                |                 |                   |

Are you employed now? \_\_\_\_\_yes \_\_\_\_\_no If hired, will you work overtime? \_\_\_\_\_yes \_\_\_\_\_no

Have you ever been bonded in prior employment? \_\_\_\_\_ If YES, list names of employers: \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been convicted of a crime (other than misdemeanors or traffic offenses)? \_\_\_\_\_

If YES, list convictions: \_\_\_\_\_

(A conviction does not necessarily disqualify an applicant for the position applied for)

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## PRIOR EMPLOYMENT

START WITH YOUR MOST RECENT EMPLOYER

|                    |                   |    |
|--------------------|-------------------|----|
| EMPLOYER           | FROM              | TO |
| ADDRESS            | POSITION          |    |
| DUTIES             | SUPERVISOR'S NAME |    |
| REASON FOR LEAVING | BEG WAGE          |    |
|                    | ENDING WAGE       |    |
| EMPLOYER           | FROM              | TO |
| ADDRESS            | POSITION          |    |
| DUTIES             | SUPERVISOR'S NAME |    |
| REASON FOR LEAVING | BEG WAGE          |    |
|                    | ENDING WAGE       |    |
| EMPLOYER           | FROM              | TO |
| ADDRESS            | POSITION          |    |
| DUTIES             | SUPERVISOR'S NAME |    |
| REASON FOR LEAVING | BEG WAGE          |    |
|                    | ENDING WAGE       |    |

## MILITARY SERVICE

| BRANCH OF SERVICE | FROM | TO | RANK & DUTIES | DATE DISCHARGED |
|-------------------|------|----|---------------|-----------------|
|                   |      |    |               |                 |

## PERSONAL REFERENCES

| NAME | ADDRESS | YEARS KNOWN | PHONE |
|------|---------|-------------|-------|
|      |         |             |       |
|      |         |             |       |
|      |         |             |       |

The above information is true and complete to the best of my knowledge. Should I be employed by the Company, any misrepresentation or false statement contained herein may be considered cause for possible dismissal. The Company has my permission to obtain all necessary information from the references I have listed, or other sources, concerning my prior employment, personal history or credit standing and I release all parties from any possible damages resulting from disclosing such information with or without prior written notice to me. I reserve the right to know the names and addresses of any investigative agencies used in order that I may learn the information contained in any reports furnished to the Company.

I understand this application does not constitute an employment contract of any kind. Should I be employed by the Company, I may resign such employment at any time at my discretion with or without prior notice and the Company may terminate my employment at any time at their discretion, with or without cause and with or without prior notice.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

### Summary of interview:

|   |                                |
|---|--------------------------------|
|   |                                |
| Hired: <input type="checkbox"/> Yes <input type="checkbox"/> No | Position: _____                |
| Starting rate: \$ _____ per Hour                                | Scheduled to start work: _____ |
| Interviewed by: _____   | Date: _____                    |

## CERTIFICATE OF APPLICANT

I hereby certify that all information made on or in connection with this application is true and complete to the best of my knowledge and belief, and I have not knowingly withheld any fact or circumstance. I understand any misrepresentation or concealment of material fact will be sufficient grounds for rejection of my application or my removal from employment. I authorize Vend Alaska to make an inquiry as to my character, general reputation, personal characteristics, previous employers, education background, current and previous residence locations for the past 5 years, military service, and conviction records: and I authorize any former or current employer, person, firm, corporation, school, college, or governmental agency to give Vend Alaska pertinent information they may have regarding me. This authorization shall remain in effect during the course of my employment with Vend Alaska for the purpose of verifying any information contained in my employment application. In consideration of Vend Alaska's review of this application, I release Vend Alaska and all providers of information from any liability as a result of furnishing, receiving and relying on this information. I am aware of Alaska Statute 12.62.160 that provides an employer may obtain from the Alaska Department of Public Safety a record of all convictions and that a favorable record check will be a condition of any offer of employment made by Vend Alaska. I agree to such medical examination as required by law and to any other medical examination shown to be job related and consistent with business necessity. My signature below constitutes a waiver of any rights I may have to inspect and review confidential references and all other materials requested and/or submitted on a confidential basis regarding this application.

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Signature

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Date