Kuspuk School District Classified Employment Application page 1 of 3

Current Position Applied For:	S. Breec. S							
Date: Date Available	for Work:		- May (1)					
Name:	SSN:		1994 - Anledg					
Maide	en Name:							
Address:	email:							
	phone:							
Date	e of Birth:							
Have you ever been convicted of a felony, or plead guilty or no contest, including forfeiture of								
bail? (Conviction will not be an absolute b	par to employment)	. Yes	No					
Are you able to perform the specific Job P	osting?	Yes	No					
If no, explain:								
Do you have a valid AK drivers license?		Yes	No					
If yes, What is your license #:		_ expiration date:						
Do you have a high school Diploma?		Yes	No					
Do you have a GED?		Yes	No					
If no to either question above, what is the highest grade you completed?								
If yes to either question above, v	what date did your	receive diploma /	'GED?					
List any courses related to position: List any equipment that you are qualified to:								
	operate	repai	r					
	op state							
Education & Training After High School								

Name & Location	Dates Attended	Credits	Degree / Year	Major / Subjects

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Employment History. Include all jobs within the past 5 years. include others if relevant.

Employer:	Dates From/ to/
Address:	Part Time or Full Time
Phone:	Supervisor:
Job Title	May we contact your employer: Yes No
Duties:	
Reason for Leaving:	
Employer:	Dates From/ to/
Address:	Part Time or Full Time
Phone:	Supervisor:
Job Title:	May we contact your employer: Yes No
Duties:	
Reason for Leaving:	
Employer:	Dates From/ to/
Employer: Address:	Dates From/ to/ Part Time or Full Time
Address:	Part Time or Full Time
Address: Phone:	Part Time or Full Time Supervisor:
Address: Phone: Job Title	Part Time or Full Time Supervisor:
Address: Phone: Job Title Duties:	Part Time or Full Time Supervisor:
Address: Phone: Job Title Duties: Reason for Leaving:	Part Time or Full Time Supervisor: May we contact your employer: Yes No
Address: Phone: Job Title Duties: Reason for Leaving: Employer:	Part Time or Full Time Supervisor: May we contact your employer: Yes No Dates From / to /
Address: Phone: Job Title Duties: Reason for Leaving: Employer: Address:	Part Time or Full Time Supervisor: May we contact your employer: Yes No Dates From / to/ Part Time or Full Time
Address: Phone: Job Title Duties: Reason for Leaving: Employer: Address: Phone:	Part Time or Full Time Supervisor: May we contact your employer: Yes No Dates From / to/ Part Time or Full Time Supervisor:

Print additional pages if needed.

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Applicant Certification:

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 that i have not knowingly withheld any fact or circumstance. I understand that any misrepresentation or concealment of material fact will be sufficient grounds for rejection of application or removal from employment. I authorize my present and previous employers to release to the Kuspuk School District any information they may have regarding my character or my employment record and release said employers from damage or claim for furnishing said information. I agree to submit to any physical or mental examination required. I understand that a criminal background check may be performed.

Siguature	Date

Affirmative Action Survey:

The Kuspuk District does not discriminate in hiring or employment on the basis of race, color, religion, gender, national origin, age, disability, veteran status, or status with any other protected group. No questions on this application are intended to secure information to be used for such discrimination.

Government agencies require periodic reports on gender, enthicity, disability, and veteran status of applicants and employees.

This data is for analysis only. Submission of Information is voluntary.

Gender - Check one:	Male:	
	Female:	
Race/Ethnic Group - Check one:	Alaska Native / American Indian:	
	Asian / Pacific Islander:	
	Black:	
	Caucasian (White):	
	Hispanic:	
	Other:	
Check any if applicable:	Armed Services Veteran:	
	Disabled Individual:	

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