



APPLICATION FOR EMPLOYMENT

Date: _____ Position(s) Applying for: _____

To receive consideration, all information must be submitted.
If submitting a resume, ensure that all requested employment history is included.

In accordance with Public Law 93-638, the Native Village of Barrow exercises the rights in Native hire preferences, contracting, and employment practices applicable.

Applicant Information:

First Name: _____ Last Name: _____ M.I.: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: _____ SSN: _____ Gender: Male Female

Marital Status: Single Married Phone: _____

Are you known by any other name(s)? Yes No Name(s): _____

Do you possess a valid Driver's License? Yes No

If yes, license number: _____ State of Issue: _____

I am legal to work in the United States? Yes No

I am 18 years of age or older? Yes No

Are you a Tribal Member? Yes No Alaska Native/American Indian? Yes No

Have you ever been convicted of a felony and/or misdemeanor? Yes No

If yes: Date: _____ Conviction: _____

Date: _____ Conviction: _____

Emergency Contact:

First Name: _____ Last Name: _____ M.I.: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Relation: _____ Phone: _____

I have received a copy of the applicable Job Description. Yes No

Resume attached? Yes No

Signature of Applicant

I certify that answers given herein and any attachment(s) submitted are true and completed to the best of my knowledge.

I authorize Native Village of Barrow to make any necessary background inquiries.

In the event of employment, I understand that false or misleading information may result in discharge.



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First Name: _____ Last Name: _____ M.I.: _____

Education and Training:

Indicate the last level of education completed.

High School: 9 10 11 12 GED: Yes No Vocational: Yes No

University: 1 2 3 4 Graduate: 1 2 3 4

	Name	Location	Degree Earned
High School	_____	_____	_____
University	_____	_____	_____
Graduate	_____	_____	_____
Vocational	_____	_____	_____
Certificates	_____	_____	_____

1st Aid/CPR HAZWOPER PMP OSHA 10-Hour Construction

Language Skills:

	Iñupiaq			Language: _____			Language: _____		
Speak	<input type="checkbox"/> Fluent	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Fluent	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Fluent	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Read	<input type="checkbox"/> Fluent	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Fluent	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Fluent	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Write	<input type="checkbox"/> Fluent	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Fluent	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Fluent	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor

Professional References (refrain from using immediate family):

Name: _____ Email: _____ Phone: _____

Name: _____ Email: _____ Phone: _____

Name: _____ Email: _____ Phone: _____

Employment History:

Position: _____ Organization: _____

Supervisor: _____ Location: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Reason for leaving: _____

Duties & Responsibilities: _____



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First Name: _____ Last Name: _____ M.I.: _____

Employment History (continued):

Position: _____ Organization: _____

Supervisor: _____ Location: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Reason for leaving: _____

Duties & Responsibilities: _____

Position: _____ Organization: _____

Supervisor: _____ Location: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Reason for leaving: _____

Duties & Responsibilities: _____

Position: _____ Organization: _____

Supervisor: _____ Location: _____

Dates of Employment: From: _____ To: _____ Salary: _____

Reason for leaving: _____

Duties & Responsibilities: _____

Comments and/or Additional Information: _____