



**Yukon Flats School District**

P. O. Box 350  
Fort Yukon, AK 99740

Phone: 907-662-2515 or 1-800-322-2515  
Fax: 907-662-3094 or 2519

www.yfsd.org

Arctic Village  
Beaver  
Chalkyitsik  
Circle  
Fort Yukon  
Venetie

**APPLICATION FOR EMPLOYMENT**

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Position Applying For: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

If hired, when could you report to work? \_\_\_\_\_ Salary Expected: \_\_\_\_\_

**EDUCATION AND EXPERIENCE**

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Do you have a High School Diploma (or equivalent)?  Yes  No

If "No", check highest year completed:  1  2  3  4  5  6  7  8  9  10  11  12

Name of School: \_\_\_\_\_ Address: \_\_\_\_\_

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

If "Yes", Date Received: \_\_\_\_\_ Received From:\*\*\* \_\_\_\_\_

**Education or Training (list most recent first):**

<i>School Name</i>	<i>Location</i>	<i>Date(s)</i>	<i>Credits Earned</i>	<i>Subject/Degree</i>

## EMPLOYMENT HISTORY

Include all jobs held within the past five years. You may give earlier job history if applicable to the position being applied for. Include any period of unemployment over three (3) months in length. You may use additional pages if necessary. *You MUST complete the requested information on this form — “Refer to resume” will not be accepted.*

Dates (Month/Year)	Employer:	
From: To:	Address:	
Hours per Week:	Supervisor Name:	Phone:
Salary:	Job Title:	Reason for Leaving:
Duties:		
May we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Dates (Month/Year)	Employer:	
From: To:	Address:	
Hours per Week:	Supervisor Name:	Phone:
Salary:	Job Title:	Reason for Leaving:
Duties:		
May we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Dates (Month/Year)	Employer:	
From: To:	Address:	
Hours per Week:	Supervisor Name:	Phone:
Salary:	Job Title:	Reason for Leaving:
Duties:		
May we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Dates (Month/Year)	Employer:	
From: To:	Address:	
Hours per Week:	Supervisor Name:	Phone:
Salary:	Job Title:	Reason for Leaving:
Duties:		
May we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

# JOB QUALIFICATIONS

Please check the areas in which you are qualified through work experience, education and/or training.

### Secretarial / Clerical

- Typing: \_\_\_\_\_ WPM
- Data entry
- Shorthand: \_\_\_\_\_ WPM
- 10-key Calculator
- Phone Answering / Routing

### Business / Finance

- Accounting
- Accounts Payable
- Accounts Receivable
- Bookkeeping
- Cashier / Teller
- CPA
- Grants
- Payroll

### Miscellaneous

- Alaska Native Studies
- Bilingual / Bicultural
- Library Media
- Office Equipment
- Reading
- Special Education
- Substitute Teaching
- Student Activities:

\_\_\_\_\_

\_\_\_\_\_

### Custodial

- Commercial Cleaning:  
# of years: \_\_\_\_\_
- Carpet Care / Installation
- Grounds Maintenance
- Interior Painting
- Minor Maintenance

### Building Mech Systems

- Airhandling Systems
- Boiler Maintenance
- Locksmith
- Rotating Machinery
- Plumber / Pipefitter
- Water Processing Systems
- Water Handling Systems

### Carpentry

- Ceramic Tile
- Roofing Repair
- Woodfinishing / Painting

### Electrician

- Construction
- Maintenance
- Control Systems

### Heating / Ventilation

- Direct Digital Control
- Electrical Control

- Pneumatic Control
- Installation
- Maintenance

### Electronics

- Audio-Visual Repair
- Computer Repair
- Fire Alarms
- Public Address Systems

### Maintenance

- Building Preventative Maintenance
- Electrical Systems
- HVAC Systems
- Water Systems

### Vehicle / Equipment Repair

- Appliance Repair
- Small-Engine Repair
- Auto Repair
- Truck Repair

### Warehousing

- Commercial Driving
- Heavy Delivery
- Parts Expediter
- Parts Inventory
- Parts Procurement

### Computers (proficiency level)

	<i>None</i>	<i>Minimal</i>	<i>Good</i>	<i>Expert</i>
PC ("Windows") computers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Macintosh Computers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Word	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Excel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Powerpoint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Desktop Publishing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

List all licenses / permits / certificates / endorsements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# CERTIFICATION OF APPLICATION

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Do you have a valid driver's license?  Yes  No

If Yes, list license#: \_\_\_\_\_ State of issue: \_\_\_\_\_ Expiration: \_\_\_\_\_

Have you ever been convicted of, or received a suspended imposition of sentence for, a misdemeanor?  Yes  No

If Yes, describe in full, and list the city and state in which convicted: \_\_\_\_\_

Have you ever been convicted of, or received a suspended imposition of sentence for, a felony?  Yes  No

If Yes, describe in full, and list the city and state in which convicted: \_\_\_\_\_

Have you ever been involuntarily released or asked to resign for any reason?  Yes  No

If Yes, describe in full, and list the position: \_\_\_\_\_

If you have served in the military, did you receive an honorable discharge?  Yes  No

If No, what type of discharge did you receive? \_\_\_\_\_ [Please provide a copy of your latest DD214]

## REFERENCES

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List three references (not relatives or employers) that have knowledge of your character, experience, and ability:

1. Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone#: \_\_\_\_\_

BY SIGNING THIS APPLICATION 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 my application or my removal from employment. An inquiry may be made to include confirmation and information as to my character, general reputation, personal characteristics, previous employers, educational background, current and previous residence locations for the past five years, military service and conviction records. I have never been involuntarily released from any position, nor have I been asked to resign for any reason. I have not committed any criminal act of child abuse or molestation or any sexual abuse of a minor; any act involving the illegal use or abuse of a controlled substance; any criminal act involving the use or abuse of alcohol; or any other crime of immorality (which means any act involving a crime of moral turpitude under the Laws of the State of Alaska). If I have been involved in any of the situations listed above, I have attached to this application a description of the events and an explanation why I believe such situation should not adversely affect my application for employment. I authorize my present and previous employers and listed references to release to the YFSD any information they may have regarding my character, background, or my employment record. I release these individuals and their agents from any damage or claim for furnishing said information. I am aware that Alaska Statute 12.62.035 provides that an employer may obtain from the Alaska Commission on Criminal Justice a record of all convictions, and that a favorable record check will be a condition of any offer of employment made by the YFSD. I understand that employment with the YFSD requires the approval of the Superintendent. Employment offers are made only by the District's Human Resources Department and must be ratified by the School Board.

THE YUKON FLATS SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER AND COMPLIES WITH TITLE IX OF THE *EDUCATION AMENDMENT ACT OF 1972*, with the *Americans with Disabilities Act*, and with all other state and federal employment laws. The District does not discriminate against any person on the basis of race, religion, color, national origin, age, disability, gender, marital status, changes in marital status, pregnancy or parenthood. Should you need any assistance for any reason during any stage of the employment process, please discuss your needs with a member of the Human Resources Staff. Every effort will be made to reasonably accommodate you in this process.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*REVIEW YOUR APPLICATION FOR COMPLETENESS AND ACCURACY*

# EQUAL EMPLOYMENT OPPORTUNITY SURVEY

**Name (Last, First, M.I.):**

**Social Security #:**

## TO ALL APPLICANTS

We consider all applicants for positions without regards to race, color, religion, gender, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly-protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria. This survey is to be completed on a voluntary basis—not for interview purposes—and will be filed separately from the application.

**Position Applying For:**

## RACE, ETHNICITY AND GENDER INFORMATION

	<i>Female</i>	<i>Male</i>
Alaskan Native	<input type="checkbox"/>	<input type="checkbox"/>
Other American Indian / Native American	<input type="checkbox"/>	<input type="checkbox"/>
Asian	<input type="checkbox"/>	<input type="checkbox"/>
Native Hawaiian / Pacific Islander	<input type="checkbox"/>	<input type="checkbox"/>
African-American	<input type="checkbox"/>	<input type="checkbox"/>
Hispanic	<input type="checkbox"/>	<input type="checkbox"/>
White	<input type="checkbox"/>	<input type="checkbox"/>
Multi-Ethnic	<input type="checkbox"/>	<input type="checkbox"/>

## DEFINITIONS OF RACIAL / ETHNIC GROUPS

The racial/ethnic groups for State affirmative action programs and federal reporting purposes are defined as follows:

- Alaskan Native:** Any person having origins in any of the original peoples of Alaska, and who maintains cultural identification through tribal affiliation or community recognition. Alaskan native may include , for example, and person of Yupik, Inupiat, Aleut, Athabascan, Tlingit, Haida or Tsimshian origin.
- American Indian / Native American:** Any person having origins in any of the original peoples of North America (not including Alaska), and who maintains cultural identification through tribal affiliation or community recognition.
- Asian:** Any person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian subcontinent.
- Native Hawaiian / Pacific Islander:** Any person having origins in any of the Hawaiian or Pacific islands.
- African-American:** *[Not of Hispanic origin]* Any person having origins in any of the black racial groups of Africa
- Hispanic:** Any person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- White:** *[Not of Hispanic origin]* Any person having origins in any of the original peoples of Europe, North Africa or the Middle East.
- Multi-Ethnic:** Any person having origins from two or more ethnic/racial groups.

**PLEASE RETURN WITH APPLICATION**