



APPLICATION FOR EMPLOYMENT

Chickaloon Village Traditional Council
P.O. Box 1105
Chickaloon, Alaska 99674
907-745-0749

POSITION APPLYING FOR _____ Date _____

IDENTIFICATION

Chickaloon Village Traditional Council (CVTC) is an equal opportunity employer. CVTC does not discriminate in hiring or employment because of race, color, religion, creed, national origin, sex, age, or marital status. Further CVTC will not discriminate in hiring on the basis of any disability or handicap and will recognize and follow all federal state and local laws on discrimination.

PLEASE PRINT OR TYPE

Name (Last) _____ (First) _____ (Middle) _____

Residence Address (No. and Street) _____ City _____ State _____ Zip _____

Mailing Address (No. and Street) _____ City _____ State _____ Zip _____

Phone: _____ E-Mail Address _____ Min. acceptable starting salary \$ _____

Date Available: _____ Location Restrictions: _____

Are willing to work nights, weekends, holidays, or overtime as necessary? Yes No

Comments: _____

Available for after-hours, call-out, and on-call assignments? Yes No

Comments: _____

Would you accept a temporary position? Yes No

Are you related, directly or by marriage, to any present or past CVTC employee? No Yes

If yes, to whom are you related? _____

Do you know *anyone* who has worked for CVTC? No Yes If yes, who? _____

Have you previously worked for CVTC? No Yes If yes, give job title and dates of employment.
From: _____ To: _____

Are you authorized to work in the USA? No Yes (Note: Should you be hired by CVTC you will need to be able to comply with federal regulations requiring proof of citizenship or immigration documentation.)

Have you ever been convicted of a felony? No Yes If yes, give details and jurisdiction (state and county) where such conviction occurred. (Note: A conviction is not an automatic disqualification to employment; each case will be considered on it's own merit). _____

If the job position for which you are applying requires a valid Alaska driver's license, please complete to following:

License Number: _____ Expiration Date: _____

(Note: All employees who either operate a CVTC vehicle, or could reasonably be required to operate a CVTC vehicle must have a valid Alaska driver's license and a driving record which is acceptable and insurable by CVTC's insurance carrier. A copy of your driving record will be requested prior to you being officially hired. A current copy may also be required annually while employed by CVTC. Failure to meet these requirements could result in you not being hired, or, if hired, your immediate termination).

Name (Last)

(First)

(Middle)

EMPLOYMENT

EMPLOYMENT RECORD: List your employment history beginning with the most recent or present employer. Indicate name under which employed if different than this application. **Complete application fully.** A resume is appreciated but DO NOT WRITE 'SEE RESUME'. **IMPORTANT:** State full particulars of all employment, accounting for all of your time over the last ten (10) years, whether employed or not. If employing company is out of business, so state. If you have been conducting your own business, give names, phone numbers and addresses of at least two clients who we may contact. Attach additional sheets if necessary.

WORK HISTORY

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

FROM: _____ TO: _____ NAME OF BUSINESS: _____

PHONE NUMBER: _____ NATURE OF BUSINESS: _____

ADDRESS: (No. & Street) _____ CITY _____ STATE _____ ZIP _____

POSITION HELD: _____ SALARY: _____

NAME AND TITLE OF SUPERVISOR: _____

DUTIES: _____

REASON FOR LEAVING: _____

NAME UNDER WHICH EMPLOYED: (if different than application)

FROM: _____ TO: _____ NAME OF BUSINESS: _____

PHONE NUMBER: _____ NATURE OF BUSINESS: _____

ADDRESS: (No. & Street) _____ CITY _____ STATE _____ ZIP _____

POSITION HELD: _____ SALARY: _____

NAME AND TITLE OF SUPERVISOR: _____

DUTIES: _____

REASON FOR LEAVING: _____

NAME UNDER WHICH EMPLOYED: (if different than application)

FROM: _____ TO: _____ NAME OF BUSINESS: _____

PHONE NUMBER: _____ NATURE OF BUSINESS: _____

ADDRESS: (No. & Street) _____ CITY _____ STATE _____ ZIP _____

POSITION HELD: _____ SALARY: _____

NAME AND TITLE OF SUPERVISOR: _____

DUTIES: _____

REASON FOR LEAVING: _____

NAME UNDER WHICH EMPLOYED: (if different than application) _____

Name (Last)

(First)

(Middle)

If any other work experience would be applicable, please summarize experience here or attach additional work history sheets.

EDUCATION

SCHOOLS	NAME	CITY/STATE	FROM/TO	GRADUATED	DEGREE/CERT	MAJOR/MINOR
HIGH SCHOOL	_____	_____	_____	_____	_____	_____
COLLEGE	_____	_____	_____	_____	_____	_____
GRAD SCHOOL	_____	_____	_____	_____	_____	_____
VOC/TECH	_____	_____	_____	_____	_____	_____

Courses, workshops, seminars or other specialized or advanced job-related training: _____

TYPE OF LICENSE/CERTIFICATION HELD	CERTIFICATE OR LICENSE NUMBER	EXPIRATION DATE
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Job-related skills or abilities: _____

PERSONAL REFERENCES

List three personal references that are not related to you and have known you for at least five years

NAME	PHONE	ADDRESS	RELATIONSHIP
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CHECK ONE OF THE FOLLOWING

Some positions require that you use Tribal vehicles to perform your job duties. In order to use the Tribal vehicles you must be over the age of 21.

- I am over the age of 21
- I am under the age of 21

CVTC has Native hiring preference in accordance with PL 93-638. Please check which best describes you:

- Non-Native
- ALASKA NATIVE OR AMERICAN INDIAN – Persons having origins in any of the original Peoples of North America and who maintain cultural identification through Tribal affiliation.

Name (Last)

(First)

(Middle)

Summary of Skills

Please place #1-5 in those areas where you have prior experience:

1 = less than Six months

2 = Six to Twelve months

3 = One to Two years

4 = Three to Four years

5 = Five or more years

Typing		Teaching (Ages/Subjects?)	Construction, Misc Labor
Data Entry			Carpentry
Form Creation		Child Care	Framing
Proofreading		CPR	Heating
10 Key		First Aid	Plumbing
Copiers		Home Health Care	Concrete Work
Telephone/Switchboard		PCA	Electrical
Filing		CHAP	Engineering
Cashier		EMT (I, II, III)	Foreman
Speed Writing/Shorthand		Social Work	Drafting
Complaint Handling		Psychology	Architecture
Word Processing (Word)		Traditional Medicine	Work Orders
Spreadsheets (Excel)		Physician's Assistant	House/Home Inspections
Auditing		Forestry	Heavy Equip. Operator
Bookkeeping		GIS	Truck Driving
Payroll		Auto-Cad	Mechanic
Petty Cash		Mapping	Purchasing
Contracts		Map Reading	Multi-Media
Grant Writing		Logging	Public Speaking
Report Writing		Brush Cutting	Legal Experience
Policy/Procedure Writing		Tree Trimming	Reporter (News)
Record Keeping		Trail Marking	Art Work:
Composing Correspondence		Trail Maintenance	Drawing by hand
Management		Fishing/Hunting	Computer Aided Art
Administration		Agriculture/Farming	Graphic Arts
Supervision		Firefighting	Photography, Still
Interviewing		2-Way Radios	Photography, Moving
Personnel Training			Photography w/computer
Computer Hardware/Networking		Foreign Languages:	
Computer Troubleshooting		Ahtna/Athabaskan	3 rd Party Billing
Legal Experience		Other (describe)	Transcription, Misc
Legal Research			Transcription, Medical
Legal Interpretation			Signature Software
			Case Management
			HIPAA Regulations

AGREEMENT – READ CAREFULLY.

I UNDERSTAND, CERTIFY AND AGREE TO THE FOLLOWING CONDITIONS OF EMPLOYMENT:

I understand that submission of this application, and its acceptance by CVTC, does not obligate CVTC to interview me or offer me employment of any fashion. I further understand that if employment is offered, it is offered "at will", and such employment is for no definite period of time. Therefore, I may terminate my employment with CVTC at any time, with or without notice, and CVTC may terminate my employment at any time, with or without notice.

I authorize employers, schools and references to release information about me to CVTC. It is my understanding that CVTC may make a thorough investigation of my entire work history and may verify all data given in my application for employment, related papers, or oral interviews. I authorize such investigation and the giving or receiving of any such information. I understand that any falsification of this data, any material misrepresentation, or any deliberate omission of a fact may prevent my being hired, or if hired, may subject me to immediate dismissal. I certify that all the employment materials I have submitted are true, accurate and correct.

I understand to qualify for some positions; I must successfully complete a required training program and maintain licenses, certificates or other qualifications during employment. I also understand that certain job positions at CVTC may require physical examinations to determine my ability to perform the essential functions of the position. I will participate in any required post-offer physical examination and, in conjunction with this examination, I authorize any physician or hospital to release any information which may be necessary for CVTC to determine my ability to perform the essential functions of the position offered to me.

If the position I am applying for requires a valid Alaska driver's license, I hereby authorize the Department of Public Safety, Division of Motor Vehicles to release my driving record to CVTC and/or its insurance carrier.

I agree that, if accepted for employment, CVTC will furnish, upon request from other future prospective employers of mine, the following information relating to my CVTC employment (1) dates of employment; (2) job title; and (3) eligibility for rehire. My acceptance of employment at CVTC constitutes consent to release such information, and I release CVTC and its officers and employees from any claim of liability of whatever nature which might result from such release of information. Should I desire that further information be provided to any potential employer or other entity; I will execute a release of CVTC, together with its officers, agents, and employees, from any liability or claim of liability which might arise out of the release of other information related to my CVTC employment.

I understand that CVTC has a drug and alcohol-free philosophy and maintains a post-offer drug and alcohol testing program and that when applying for a position with CVTC I may be required to submit to a post-offer drug and alcohol test and any positive test results, or refusal to consent to these tests, will disqualify me from employment. I further understand that once employed, I may be subject to reasonable suspicion drug and alcohol tests.

I agree to conform to the rules and regulations of CVTC. I understand that CVTC can change wages, benefits and conditions at any time. Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime, shift work or a work schedule other than Monday through Friday.

SIGNATURE

DATE

PRINT NAME