

Employment Application

COMPANY OR EMPLOYER NAME: _____

Position applying for: _____

EMPLOYEE INFORMATION

Name: _____
 Last First Middle
 Telephone: _____ Email: _____ Alternate telephone: _____
 Address: _____

Are you able to perform the essential functions of the position with or without accommodations?
 Yes No

If necessary for the job, I am able to:

Work overtime? Yes No
 Provide a valid Alaska Driver's License? Yes No

If necessary for the job are you older than:
 14 15 16 (Check one)
 18 19 21

If so, fill out the following: Issuing state: _____

Type: _____
 Endorsement(s): Hazardous Material Passengers

I am legally eligible for employment in the U.S.?
 Yes No

Tankers Tank with Hazardous Materials
 School Bus Double/Triple trailers

I am seeking a permanent position: Yes No

Work the following shifts: (check all that apply)

Any Day Night Swing Rotating
 Split Graveyard Other: _____

I will be able to report to work
 _____ **days after being notified I am hired.**

EMPLOYMENT HISTORY

List most recent employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary following this section or on an extra sheet of paper if necessary. No more than 10 years history recommended.

| | | | |
|---|---|---------------------------------------|--------------------|
| Employer name and address: _____ _____ _____ | Position title/duties, skills: _____ _____ _____ | Start date: _____ | End date: _____ |
| Pay: \$ _____ Per: _____ | Supervisor: _____ Telephone: _____ | Reason for leaving: _____ _____ | |
| Employer name and address: _____ _____ _____ | Position title/duties, skills: _____ _____ _____ | Start date: _____ | End date: _____ |
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| Employer name and address: _____ _____ _____ | Position title/duties, skills: _____ _____ _____ | Start date: _____ | End date: _____ |
| Pay: \$ _____ Per: _____ | Supervisor: _____ Telephone: _____ | Reason for leaving: _____ _____ | |

Summarize other employment related to this job:

EDUCATION

| | Institution name | Years completed | Field of study | Graduate or degree |
|--------------------|------------------|-----------------|----------------|--------------------|
| High school | | | | |
| College/university | | | | |
| Business/technical | | | | |
| Additional | | | | |

MILITARY

Are you a veteran? Yes No
Duty/specialized training: _____

SKILLS & QUALIFICATIONS

Other qualifications such as special skills, abilities or honors that should be considered:

Types of computers, software, and other equipment you are qualified to operate or repair:

Professional licenses, certifications or registrations:

Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employer's attention:

Typing speed: _____ per minute

REFERENCES

List two personal references who are not relatives or former supervisors.

| Name | Address | Telephone | Occupation | Years known |
|------|---------|-----------|------------|-------------|
| | | | | |
| | | | | |

CONTACT

In case of accident or illness, please contact: Name: _____ Daytime phone: _____
Address: _____ Relationship: _____

INFORMATION TO THE APPLICANT

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.

Signature of Applicant _____

Date _____

Equal Employment Opportunity: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no affect on your application for employment.

Developed at employer request by the Alaska Department of Labor & Workforce Development, Employment Security Division.

CONFIDENTIAL

Background Check Authorization

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ DOB: _____

Telephone Number: _____

Drivers License Number/State: _____

The information contained in this application is correct to the best of my knowledge.

I hereby authorize University Refuse, LLC dba H&H Service Center and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to University Refuse, LLC dba H&H Service Center or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources. University Refuse, LLC dba H&H Service Center and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers, and dates of birth.

Signature: _____ Date: _____