

**EMPLOYMENT APPLICATION**  
DELTA JUNCTION CHAMBER OF COMMERCE/VISITOR'S CENTER  
PO BOX 987  
DELTA JUNCTION, ALASKA 99737

Name: \_\_\_\_\_  
                    **Last**                                    **First**                                    **Middle**

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position applying for: \_\_\_\_\_

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

Are you legally eligible for employment in the U.S.?  
Yes: \_\_\_\_\_ No: \_\_\_\_\_

What days of the week are you available? (Check all that apply)  
Sun: \_\_\_\_\_ Mon: \_\_\_\_\_ Tues: \_\_\_\_\_ Wed: \_\_\_\_\_ Thur: \_\_\_\_\_ Fri: \_\_\_\_\_ Sat: \_\_\_\_\_

Which shifts do you prefer? (Check all that apply)  
AM: \_\_\_\_\_ PM: \_\_\_\_\_ Weekdays only: \_\_\_\_\_ Weekends only: \_\_\_\_\_ Other: \_\_\_\_\_

What date would you be able to report to work? \_\_\_\_\_

**EMPLOYMENT HISTORY**

Please list most recent employment first, including summer or temporary jobs. List all of your experience related to this position. No more than 10 years of history is necessary. Be as detailed as possible. Use additional sheets if necessary.

Employer Name and Address: \_\_\_\_\_  
Position Title: \_\_\_\_\_  
Start and End Date: \_\_\_\_\_  
Job duties: \_\_\_\_\_  
Pay (hourly or yearly) \_\_\_\_\_  
Supervisor Name/Phone: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer Name and Address: \_\_\_\_\_  
Position Title: \_\_\_\_\_  
Start and End Date: \_\_\_\_\_  
Job duties: \_\_\_\_\_  
Pay (hourly or yearly) \_\_\_\_\_  
Supervisor Name/Phone: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer Name and Address: \_\_\_\_\_  
Position Title: \_\_\_\_\_  
Start and End Date: \_\_\_\_\_  
Job duties: \_\_\_\_\_

Pay (hourly or yearly) \_\_\_\_\_  
Supervisor Name/Phone: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer Name and Address: \_\_\_\_\_  
Position Title: \_\_\_\_\_  
Start and End Date: \_\_\_\_\_  
Job duties: \_\_\_\_\_  
Pay (hourly or yearly) \_\_\_\_\_  
Supervisor Name/Phone: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

### EDUCATION

Highest education completed (Check all that apply):  
High School: \_\_\_\_\_ College: \_\_\_\_\_ Technical: \_\_\_\_\_ Additional: \_\_\_\_\_

### MILITARY

Are you a veteran? Yes: \_\_\_\_\_ No: \_\_\_\_\_

### SKILLS & QUALIFICATIONS

Types of computers, software, and other equipment you are qualified to operate: \_\_\_\_\_

### REFERENCES

Please list one personal reference and two former business supervisor references.

Personal: \_\_\_\_\_  
Name Phone Email To/From Dates Known

Business: \_\_\_\_\_  
Name Phone Email To/From Dates Known

Business: \_\_\_\_\_  
Name Phone Email To/From Dates Known

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.

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Signature of Applicant \_\_\_\_\_ Date (mm/dd/year) \_\_\_\_\_

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.