



AND SUBSIDIARIES

Employment Application & Emergency Contact Information

Applicant Information

Full Name: Last First M.I.

Date of Birth: Social Security Number:

Address: Street Address Apartment/Unit #

City State ZIP Code

Home Phone: Cell Phone:

Email:

Emergency Contact: Relationship: Phone:

Position Applied for:

Date you can start: Salary Desired:

How did you hear about this position?

- Checkboxes for Newspaper, Job Fair, Other, Company Employee, Placement Office, Professional Publication, Web Site.

General

Subjects of Special Study or Research:

Special Training:

Special Skills:

Military Service: Service Began:

Rank: Ended:

FOR FEDERAL CONTRACTING & EEO REPORTING:

Are you an Eklutna Shareholder? Are you eligible for Alaska Native Preference Hire? BIA Card Number: Black or African American Hispanic or Latino Asian Native Hawaiian or Other Pacific Islander Two or More Races White

## Work History

Name of Present or Last Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Starting Date: \_\_\_\_\_ Leaving Date \_\_\_\_\_  
Job Title: \_\_\_\_\_ May we contact your Supervisor? \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Description of Work Performed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name of Present or Last Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Starting Date: \_\_\_\_\_ Leaving Date \_\_\_\_\_  
Job Title: \_\_\_\_\_ May we contact your Supervisor? \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Description of Work Performed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name of Present or Last Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Starting Date: \_\_\_\_\_ Leaving Date \_\_\_\_\_  
Job Title: \_\_\_\_\_ May we contact your Supervisor? \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Description of Work Performed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

\*\*\*Include Resume As Attachment is Possible\*\*\*

Have you been convicted of a felony? If yes please explain (It will not necessarily exclude you from consideration):

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References				
	Name	Address	Business	Years Acquainted
1				
2				
3				

**AUTHORIZATION:**

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company of all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

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Date \_\_\_\_\_ Signature \_\_\_\_\_

Office Use Only: \_\_\_\_\_

- Hiring Entity:
- Eklutna, Inc.
  - Eklutna Services, LLC.
  - Eklutna Construction, LLC.