

CITY AND BOROUGH OF SITKA

A COAST GUARD CITY

HUMAN RESOURCES

100 Lincoln Street | Sitka, Alaska 99835 www.cityofsitka.com hr@cityofsitka.org 907-747-1816

EMPLOYMENT APPLICATION

This application must be filled out completely. Incomplete applications may not be considered. Job descriptions for each position are available at the City and Borough of Sitka (CBS), and descriptions for open positions are available at cityofsitka.org.

	Date Received:				
Position applying for:			Date available for work:		
Last Name		First Name		Middle Name	
Previous or Other N	lames Used				
Mailing Address					
Street or P.O. Box					
City, State Zip					
		Physical	Address		
Street					
City, State Zip					
Contact Information					
Email address:					
Daytime phone number Evening phone r		umber	Cell phone number		
How Did You Learn of this Job Opportunity?					
□City of Sitka Website		□Job Service			
□Newspaper		□Radio			
□Friend		□Alaska Munic	ipal League		
☐Local Organization (Specify)					
□Website (Specify)					
□Other (Specify)					

A complete and accurate application must be submitted for each position and received by the Human Resources Office by 5:00 pm on the closing date listed on the Position Announcement. All sections of the application must be legible, completely filled out, signed, and dated. Use additional sheets if necessary to ensure all information is provided. A resumé may be included as an addendum to the Employment History section of the application as long as it provides all of the information required in this section.

Criminal Convictions: A criminal conviction, including non-judicial punishment issued during military service by a military tribunal, military administrative agency, or by a commanding officer, for offenses comparable to violations of federal, state, and local criminal laws, will not always constitute grounds for disqualification. The type and number of charges for which an applicant was convicted, date of the conviction(s), as well as the relationship to the applied for position will be evaluated. Additionally, if you check "yes" and do not give a complete and accurate explanation of your conviction(s), your application will not be considered for the position.

An applicant who receives an unconditional pardon or receives a Suspended Imposition of Sentence AND had the conviction(s) set aside by court order, need not list the conviction UNLESS the applicant is applying for a position requiring a background check or is required to register as a sex offender under AS 12.63.

We appreciate the time you spend completing this application. The employer, in accordance with state and federal laws, does not discriminate on the basis of age, race, religion, color, sex, national origin, ancestry, mental or physical disability, veteran status, citizenship, or any other protected classification.

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify Human Resources.

Thank you for your interest in serving the citizens of Sitka!!

Are you a U.S. citizen or otherwise eligible for employment in the U.S.?				
Are you 18 years or older?				
	□Yes	□No		
	□Yes	□No		
	□Yes	□No		
Do you currently have any relatives working at CBS? ☐ Yes ☐ Note the name, relationship, and the position (or department):				
Are you enrolled in Alaska PERS? If so, what Tier?				
Full Time	□Yes	□No		
Part Time	□Yes	□No		
Temporary	□Yes	□No		
Evenings	□Yes	□No		
Nights	□Yes	□No		
Weekends	□Yes	□No		
Holidays	□Yes	□No		
Have you ever been convicted of a felony?				
Have you been convicted of a misdemeanor within the last five years?				
	Full Time Part Time Temporary Evenings Nights Weekends Holidays	□Yes □Yes □Yes : □Yes Full Time □Yes Part Time □Yes Temporary □Yes Evenings □Yes Nights □Yes Weekends □Yes Holidays □Yes □Yes □Yes		

Do you have any criminal charges pending against you? $\ \ \ \ \ \ \ \ \ \ \ \ \ $				
If so, please list the charges:				
If you answer yes to any of the a	<mark>bove three ques</mark> t	tions, you	ı must explain on	a separate piece of
paper and attach it to this application	ation, even if yo	<mark>u receive</mark>	<mark>d suspended impo</mark>	osition of a sentence.
Conviction will not necessarily of	<mark>lisqualify an ap</mark> j	<mark>plicant fr</mark>	om employment.	
	Edu	ıcation		
Did you receive your high school	diploma? □Yes	□No	If not, highest gra	nde completed?
Did you receive your GED? □Yes	s \square No		Date GED receive	ed:
Have you received any education		ol? □Yes	□No	
Business, technical, or vocationa				
Name and address			Degree or	Graduated? List date
	Credits ear	ned	major	
			<u> </u>	
IIn dangua du eta Callaga an IInizza				[
Undergraduate College or Unive	rsity		D	C 1 12 I :- (1-1-
Name and address	Credits ear	ned	Degree or	Graduated? List date
			major	
Graduate Professional	г			Г
Name and address	Credits ear	ned	Course of study	Graduated? List date
	<u> </u>			<u> </u>
	Employn	nent Hist	orv	
List all of your work history for the				ition, please be specific
List all of your work history for the last seven years. To receive full consideration, please be specific listing duties performed and explain any gaps in employment. Attach additional sheets if necessary.				
Current or last employer	9-1	Title		<u>, , , , , , , , , , , , , , , , , , , </u>
Carrent of last employer		Title		
Supervisor name		Supervisor phone & email		
Supervisor name		Supervis	sor prioric & cirian	
Company address				
Starting salary				
Dates of ampleyment From	To	salary	Number of or	malarrasa sumanrias d.
Dates of employment From:	To:		Number of er	mployees supervised:
Description of duties:				

Reason for leaving:	May we contact your supervisor? \Box Yes \Box No					
Previous employer		Title				
Supervisor name	Supervisor phone & email					
Company address						
Starting salary		Last				
		salary				
Dates of employment From:	To:		Number of employees supervised:			
Description of duties:						
Reason for leaving:		May we cor	ntact your supervisor?	□Yes	□No	
Previous employer		Title	index y our supervisor.	1 = 165		
Supervisor name		Supervisor phone & email				
Company address						
Starting salary		Last salary				
Dates of employment From:	To:	, , , , , , , , , , , , , , , , , , , ,	Number of employees	supervis	ed:	
Description of duties:						
Reason for leaving:		May we contact your supervisor? \square Yes \square No				
Previous employer		Title				
Supervisor name	Supervisor phone & email					
Company address						
Starting salary		Last				
		salary				
Dates of employment From: To:			Number of employees supervised:			
Description of duties:						
Reason for leaving:		May we contact your supervisor? \Box Yes \Box No				

Other Qualifications				
Describe any specialized training,	apprenticeship, skills, and extra-cu	ırricular activities.		
Describe any job-related training	received in the United States Milita	rv.		
, ,				
List must assismed the de business	on sinia activities and offices held			
List professional, trade, business,	or civic activities and offices held.			
List professional, trade, or busines	ss licenses held.			
Additional Information				
State any additional information y	you feel may be helpful to us in con	sidering your application.		
	lls and qualifications from employr			
References				
Do not include family members or past supervisors.				
Name	Phone Number	Occupation		

Note to Applicants:

DO NOT ANSWER THE NEXT QUESTION UNLESS YOU HAVE REVIEWED THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING. PLEASE SEE JOB DESCRIPTION.

Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. ☐ Yes \square No APPLICANT AUTHORIZATION AND CERTIFICATION – I AUTHORIZE the City and Borough of Sitka (CBS) to obtain any information relating to the facts provided in this application from schools, employers, criminal justice agencies, individuals, ETC. This information may include, but is not limited to, academic, performance, attendance, achievement, personal history, disciplinary, arrest, and conviction records. I DIRECT you to release such information to the CBS regardless of any agreement I may have made with you previously to the contrary. I RELEASE any employer, including individuals such as records custodians, from any and all liability for damages of whatever kind of nature which may at any time result on account of compliance, or any attempts to comply with this authorization. I CERTIFY that the statements contained herein are true to the best of my knowledge. I understand that any incomplete, inaccurate, misleading, false or incorrect information may result in rejection of my application, disqualification from consideration, may render an appointment void and/or can be cause for my dismissal upon discovery. **I AGREE** to submit to such tests and physical and/or mental examinations as the CBS may require. For e-mail submissions only: By submitting this form the applicant certifies that the information contained in the documents is correct and acknowledges that the applicant will be required to sign the form to re-confirm that certification prior to interviewing for any position. A photocopy of facsimile (fax) of this form that shows my signature shall be as valid as the original. Name **Position Applying For**

Signature

Date

City and Borough of Sitka

Equal Employment Opportunity Survey

Last Name	First Name	Middle Name	
Position(s) Applying For			

To All Applicants

The information requested on this page is necessary for the City and Borough of Sitka to comply with the regulations of Alaska State Commission for Human Rights. This information will not be seen by the hiring board for any jobs that you are applying for, it will be kept confidential and be available only to Federal and State personnel legally charged with administering Civil Rights Laws and Regulations. However, statistical information compiled from records on age, sex and race shall be made available to the public.

Age Information			
Your Age	Date of Birth		

RACE, ETHNICITY AND GENDER INFORMATION (Please review definitions below)

	Female	Male
Alaskan Native		
American Indian		
Asian or Pacific Islander		
Black		
Hispanic		
White		
Mixed		

Definitions of Racial/Ethnic Groups

The racial/ethnic groups for Federal and State reporting purposes are defined as follows:

Alaskan Native: A 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, any person of Yup'ik, Inupiat, Aleut, Athabascan, Tlingit, Haida or Tsimshian origin.

American Indian: A 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 or Pacific Islander: A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

Black: A person having origins in any of the Black racial groups of Africa (not of Hispanic origin).

Hispanic: A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

White: A person having origins on any of the original people of Europe, North Africa or the Middle East (not of Hispanic origin).

Mixed: A person whose parents or ancestors are from two or more ethnic backgrounds described above in this section.