



CLASSIFIED EMPLOYMENT APPLICATION

NOTE: Résumé's are accepted but will not be used as a substitute for any section of this application. Application Date: _____

Position/s Applying For			Available Date to Start	
			Home Phone	Business Phone
Last Name	First Name	Middle	Cell Phone	
Mailing Address			Social Security Number	
City	State	Zip Code	Email Address	

High School Graduate	YES	NO	High School Equivalent (GED)	YES	NO
If YES, Date & Location:			If YES, Attach a Copy:		

Unless you are a graduate of LKSD, you must attach a copy of your high school diploma.

Name & Address of High School Attended:

EDUCATION OR TRAINING AFTER HIGH SCHOOL

Name & Location	Dates Attended	# Sem Hrs	# Qtr Hrs	Degree	Major / Subject Area

USE OF ELECTRONIC OR MECHANICAL EQUIPMENT

Circle One

- YES / NO **Calculator / 10-Key**
- YES / NO **Computer (MAC or PC)**
- YES / NO **Driver's License # & State Issued:** _____
- YES / NO **Typewriter / Keyboard**
- YES / NO **Other: (list) _____**

Circle One

- Some Knowledge / Proficient / Expert
- Some Knowledge / Proficient / Expert
- WPM: _____

List All Software Programs
You Are Able to Operate

What languages are you fluent in? _____

What languages are you literate in? _____

WORK EXPERIENCE

Include all jobs you have held within the past five years. List jobs in chronological order with most current position first. Include all employment over three months in length.

Most recent/present employer	Dates of Employment
Address	Supervisor
City State Zip	Contact Number
Job Title	Wage/salary per
Duties	Hours per week Number persons supervised
	Reason for leaving

Employing Firm	Dates of Employment
Address	Supervisor
City State Zip	Contact Number
Job Title	Wage/salary per
Duties	Hours per week Number persons supervised
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Employing Firm	Dates of Employment
Address	Supervisor
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AFFIRMATIVE ACTION STATISTICS

The Lower Kuskokwim School District is an Affirmative Action employer, and we will take steps to affirm full and equal employment opportunity for all applicants, regardless of race, color, religion, sex, national origin, age, marital status, pregnancy or parenthood, or physical, sensory or mental handicaps. The following information is requested in order to monitor our affirmative action program, and to ensure equal employment opportunity. It will be kept confidential and will in no way adversely affect any employment decision. This information will be filed separately from all other hire documents. Your voluntary participation is requested.

Name	Position/s Applied For	Date
ETHNIC GROUP (CHECK ONE)		
Native Hawaiian or Pacific Islander <input type="checkbox"/>	Multi Ethnic (two or more races, not Hispanic) <input type="checkbox"/>	
Alaskan Native <input type="checkbox"/>	Black, Not Hispanic <input type="checkbox"/>	SEX
American Indian <input type="checkbox"/>	Hispanic <input type="checkbox"/>	Female <input type="checkbox"/>
White <input type="checkbox"/>	Asian <input type="checkbox"/>	Male <input type="checkbox"/>

AFFIDAVIT

Have you ever been fired, terminated, or asked to resign from any job you ever held? YES NO
 If you answered YES, please give details:

Have you ever been convicted of a CRIME? YES NO

If you answered YES, which state? _____

If you answered YES, please give details:

The Lower Kuskokwim School District will conduct a fingerprint / background criminal check on all new hires. The search will include criminal records with the State of Alaska Court System, the Alaska State Troopers, or other State or Federal legal entities that may have such records. Conviction information may not necessarily disqualify a person from the position/s applied for. **The required fee of approximately \$54.25 will be deducted from your first paycheck, pursuant to the authorization on the preceding page.**

Signature

Date

Printed Name

Birth Date

**LOWER KUSKOKWIM SCHOOL DISTRICT
PERSONNEL OFFICE**

REQUEST FOR INFORMATION

APSIN Criminal Background Check Printout

APPLICANT: _____
(Please Print) Last First Middle

DATE OF BIRTH: _____

Maiden Name, Previous Married Name, Aliases, & also known as:

_____ Social Security Number

_____ AK / Out of State Driver's License #

_____ Current Mailing Address

_____ Current Residential Address

_____ City, State, Zip Code

_____ Previous Address

_____ City, State, Zip

CRIMINAL RECORDS INFORMATION WAIVER AND FEE AUTHORIZATION

As an applicant for employment in the Lower Kuskokwim School District, I hereby authorize the Lower Kuskokwim School District to conduct a criminal history search. The search will require my fingerprints and use of Alaska Public Safety System records and other such records as may be found in this State and any other State or Federal jurisdiction. I also authorize any law enforcement agency to release the above information to the Lower Kuskokwim School District, Personnel Office, PO Box 305, Bethel, Alaska 99559-0305. I certify that the information I have given on this form is true and correct to the best of my knowledge. If hired, I authorize the required fee of approximately \$54.25 to be deducted from my first paycheck.

_____ Signature of Applicant

_____ Date

WORK EXPERIENCE CONTINUED

Include all jobs you have held within the past five years. List jobs in chronological order with most current position first. Include all employment over three months in length.

Employing Firm	Dates of Employment
Address	Supervisor
City State Zip	Contact Number
Job Title	Wage/salary per
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REFERENCES

Give three references that LKSD may contact who have knowledge of your work background. You cannot use relatives or your spouse as references.

CURRENT OR LAST SUPERVISOR:

Name	Mailing or Email Address
Relationship	
Business	Contact Number

PREVIOUS SUPERVISOR:

Name	Mailing or Email Address
Relationship	
Business	Contact Number

PREVIOUS SUPERVISOR or CO-WORKER:

Name	Mailing or Email Address
Relationship	
Business	Contact Number

OATH OF OFFICE

I do solemnly swear (or affirm) that I will support and defend the Constitution of the United States and the Constitution of the State of Alaska, and that I will faithfully discharge my duties to the best of my ability.

Signature

Date

I hereby certify that all information made on or in connection with this application is true and complete to the best of my knowledge and belief and that I have not knowingly withheld any fact or circumstance. I understand that any misrepresentation of material fact will be sufficient grounds for rejection of application, or removal from employment.

I authorize my present and previous employers to release to the Lower Kuskokwim School District of the State of Alaska any information they may have regarding my character or employment record and release said employers from any damage or claim for furnishing said information. I hereby agree to submit to such physical and/or mental examinations as may be required.

Signature

Date