Please complete the entire application even if you are attaching a resume.

THE ALASKA CLUB

APPLICATION FOR EMPLOYMENT Date _____

Name _____ Social Security # _____

Present Address _____ Zip Code _____

Phone # (home) _____ (work) _____

Referred by _____

❑ Check if you are 18 or over

EMPLOYMENT DESIRED

Position desired _____ Circle one: Full time Part time

Date you can start _____ salary _____

Are you employed now? _____ If so, may we contact your present employer? _____

Have you ever worked at The Alaska Club before?_____

If so, when? Month(s)_____ Year(s) _____

The Alaska Club is an equal opportunity employer and does not discriminate in compensation or terms or conditions of employment because of race, religion, color or natural origin. Nor does it discriminate because of age, physical or mental disability, sex, marital status, changes in marital status, pregnancy or parenthood when reasonable demands of the position do not require distinction on the basis of age, physical or mental disability, sex, marital status, changes in marital status, pregnancy or parenthood. This application will be considered only for the position for which you have applied, for a period of 60 days from date of application.

EDUCATION BACKGROUND

	Location	Number of years attended	Did you graduate?	Subjects of study
High School				
College or University				
Trade or Business School				

Subjects of special study or research? _____

_____

Special certifications acquired (please specify if not current) _____

_____

Activities: civic, athletic, special interest, etc. _____

_____

FORMER EMPLOYERS

List ALL former employers for the last 5 years. Use a separate sheet if necessary. We may contact the employers listed below unless instructed not to. **Please fill out each box completely.**

Date (month: year)	Name, address, phone	Title & job description	Wage	Reason for leaving	Contact, Yes/No?
From To					
From To					
From To					
From To					

REFERENCES

Please give the names of three individuals not related to you, whom you have known for at least three years. Please give current information.

Name Address Business Phone

1. _____
2. _____
3. _____

In case of emergency we are to notify: (List name, address, phone, and doctor)

_____

I authorize the investigation of all statements contained in this application. I understand that misrepresentation or omission of facts calls for cause of dismissal. I also understand that any offer of employment will be contingent upon verification that I am not registered on the Alaska sex offender list. Further I understand and agree that employment with The Alaska Club is at the mutual consent of The Alaska Club and the employee, and either party may terminate that relationship at any time, with or without advanced notice.

Date _____ Signature _____

_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____

Do not write below this line.

Interviewed by: _____ Date: _____ For Dept.: _____

Position: _____ Wages:_____ Effective date: _____

Reference check:

_____

_____

_____

_____