



McGrath Native Village Council Employment Application

PO Box 134
McGrath, Alaska 99627
PHONE: 907-524-3024 FAX: 907-524-3899

Applicant Information

Full Name: _____ **Date:** _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ **Email:** _____

Driver's License: YES ☐ NO ☐ **License #:** _____ **Desired Salary:** \$ _____ **Date Available:** _____

Position Applied for:

Are you a citizen of the United States? YES ☐ NO ☐ **If no, are you authorized to work in the U.S.?** YES ☐ NO ☐

Have you ever worked for MNVC? YES ☐ NO ☐ **If yes, when?** _____

Have you ever been convicted of a felony? YES ☐ NO ☐ **If yes, explain:** _____

Current Employment status Full-time Part time Unemployed Self-Employed In School
Available to work? Full-time Part-time Temporary Fill-in

Education

High School: _____ **Address:** _____

From: _____ **To:** _____ **Did you graduate?** YES ☐ NO ☐ **Diploma:** _____

College: _____ **Address:** _____

From: _____ **To:** _____ **Did you graduate?** YES ☐ NO ☐ **Degree:** _____

Other: _____ **Address:** _____

From: _____ **To:** _____ **Did you graduate?** YES ☐ NO ☐ **Degree:** _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Licenses/Certificates/Machinery Use & Repair

- 1.) List professional licenses, certificates and/or registrations that would be pertinent to the job for which your are applying for:

- 2.) List any professional trade, or business activities and offices held pertinent to the job for which you are applying?

Licenses/Certificates/Machinery Use & Repair

- 1.) List the machinery or equipment, specific to this position, which you are qualified to:

Operate: _____

Repair : _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

References

Please list two professional references that are not related to you.

Full Name: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____

Company: _____ Phone: _____

Address: _____

Essential Job Questions

Have you ever been told the essential functions of the job or have you been shown a copy of the job description listing the essential functions of the job?

YES

☐

NO

☐

Can you perform the essential functions with or without reasonable accommodations?

YES

☐

NO

☐

Disclaimer and Signature

- I certify that my answers are true and complete to the best of my knowledge.*
- If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*
- I authorize MNVC to investigate any of the facts described in this application and I release MNVC from any liability resulting from such an investigation.*

Under the Authority of P.L. 93-638 Indian Preference shall be given to the applicant (s) who meet the minimum qualifications.

Alaska Native /American Indian

☐

Other

☐

Signature: _____ Date: _____