

P.O. Box 360 · Hoonah, AK 99829 · (907) 945-3663 · Fax (907) 945-3445

Notice to Applicants

Thank you for your interest in applying for a position with the City of Hoonah. The enclosed packet will assist you in the application process.

Not all applicants will be interviewed. In order to be considered for an interview your application and/or resume must indicate that you meet the minimum requirements for the position available. If you are selected, during your interview you will be evaluated for job qualification, familiarity with the duties required pursuant to the job description, as well as communication and presentation skills pursuant to the specific requirements of the job. The city may also require some testing to evaluate job knowledge and skills.

Application and offer requirements. All applicants must fill out and submit a release of information for prior employers and references. Some positions within the city also require background checks. Under those circumstances applicants will also be required to fill out a background check consent form. Successful finalists in the application process, and subsequently the applicant who is selected for the position will show through written application and/or resume, interviewing, and data gathered through reference checks, that the applicant meets or exceeds the education, experience, knowledge, skills, and abilities requirements for the job. He or she will also exhibit effective public relationship skills, demonstrate the ability to get along with others including co-workers, supervisors, and elected officials, and exhibit an attitude of being a team player who is able to perform their own functions while assisting fellow workers as needed. The successful candidate will also show a history and/or willingness to keep to public service a priority. Any offer of employment is conditional upon successfully passing a preemployment drug test.

Thank you again for your interest in applying with the City of Hoonah. Good luck in the application process.



City of Hoonah_

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Application for Employment

A separate application must be submitted for each job announcement. All applications must be submitted to the City Clerk's office.

1.	Job Title						
	() Permaner	nt () Te	mporary	() Full-Time	() Part	-time	
2.	Name						
	a. (Last)		b. (Fir	st)	c. (Mi	ddle)	
3.	Other names under	which you ha	ave worked_				
4. N	Mailing address						_
	City	Sta	ate	Zip Cod	de		
5. T	'elephone number (a. (Hom	ue)	() b. (Ce	ell or alter	nate)	
6. S	ocial Security Numb	er					
7. A	are you a U.S.Citizen	or an alien au	uthorized to	work in the United	States?	Yes	No
8. A	are you a resident of	the City of Ho	oonah?			Yes	N
9. A	are you 18 years of ag	ge or older?				Yes	N
10.	Have you been conv	icted of a mise	demeanor wi	thin the past 5 years	s?	Yes	No
	If yes, describe in	full					
 11.	Have you ever been	convicted of a	a felony?			Yes	

If yes, describe in full			
PLEASE COMPLETE ALL QUESTIONS ON THE APPLICATION			

12. City of Hoonah employee: Currently Formerly Give job title, status, department and dates of City of Hoonah employment						
13. Relatives by blood or marriage employed by the City of Hoonah: Name Relationship Department						
The scheduling of in the Educational result in not being reduced score in	al and Ba g called f	ews and e ckground	examinations o l and Employn	nent History. Inc	sed upon the complete applic	cations may
			Educational E	Background		
14. Circle highes	t grade co	ompleted		High School 8 9 10 11 12		Post Graduate 1 2 MA PhD
15. Name/Addres	ss of last	high scho	ool			
16. Graduate?	Yes	No	Date of gradu	nation		
17. High school						
18. Number			Date_			
Type of School (Name, City & State)	Part Time	Full Time	Hrs. Completed	Degree Received	Major	
19. College						
20. College						
21. Graduate						

Date Attended	Date Attended	Courses Completed
From	To	

• An attachment may be necessary to include all educational background.

Employment History

Include all jobs within the past five years. Give earlier job history if pertinent to the job for which you are applying. Include military experience and volunteer work as part of job history. You may supplement this application with a resume, but all questions must be answered on the application. Do not state, "See Resume." Use additional pages if needed to give complete employment history. Start with the most recent job first.

26.

20.	T 1	
Dates of Employment	Employer:	
From:	Address:	
Tr	I.1. T'.1	
To:	Job Title:	
Starting Salary	Name of Supervisor:	
\$ Per	Supervisor's Title:	
Final Salary	Duties:	
\$ Per		
Hours Per Week:		
Number supervised:		
Reason for leaving:		

27.

Dates of Employment	Employer:
From:	Address:
To:	Job Title:
Starting Salary	Name of Supervisor:
\$ Per	Supervisor's Title:
Final Salary	Duties:
\$ Per	
Hours Per Week:	
Number supervised:	
Reason for leaving:	

28.

Employer:
Address:
Job Title:
Name of Supervisor:
Supervisor's Title:
Duties:

29.

Dates of Employment	Employer:
From:	Address:
To:	Job Title:
Starting Salary	Name of Supervisor:
\$ Per	Supervisor's Title:
Final Salary	Duties:
\$ Per	
Hours Per Week:	
Number supervised:	
Reason for leaving:	

30.

Dates of Employment	Employer:
From:	Address:
To:	Job Title:
Starting Salary	Name of Supervisor:
\$ Per	Supervisor's Title:
Final Salary	Duties:
\$ Per	
Hours Per Week:	
Number supervised:	
Reason for leaving:	

31.						
Dates of Employment		Employer:				
From:		Address:				
То:		Job Title:				
Starting Salary		Name of Super	rvisor:			
\$ Per		Supervisor's Title:				
Final Salary		Duties:				
\$ Per						
Hours Per Week:						
Number supervised:						
Reason for leaving:						
	Special Qualifications					
32. Alaska Driver's License Number Expiration Dat			ration Date			
33. List here those special qualification you are applying:	_	-	useful for the job to which			
T	Registrations and	d/or Licenses	Empiredian Deta			
Type	Issued By		Expiration Date			
34. Related college subjects to position:						
35. Typing words per n	ninute.					
36. Word processing, spread sheets, and data bases you have used:						

	cal/electronic equipment or machinery th	
Operate		Repair
	ations:	
39. List three references (NOT relatives or employers) that have known ability. Please include name, mailing ad	nowledge about your
Name	Mailing Address	Telephone
1		
2		
3		
40. How soon would you	be able to report to work after being noting	
	s:	

Certificate of Applicant

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 or concealment of material fact will be sufficient ground for rejection of this application, removal from eligible information they may have regarding my character or my employment record and release said employers and their agents from any damage or claim for furnishing said information. I hereby agree to submit to such medical and/or mental examinations as the City of Hoonah may require.

Signature	Date
Please check your applicati	ion. Be sure you have filled it out completely.

City of Hoonah Reference Check Authorization

By my signature below I	, applying for the position of
	_, authorize the City of Hoonah to conduct a reference check
for any verbal and written informa	tion or opinions concerning my duties any and all aspects of
the performance thereof.	
This authorization for providing re	eference information includes but is not limited to present and
past employers, supervisors, collea	agues and persons I have supervised.
Signed:	date:
City of Hoomah D	ack Craund Charle Authorization
City of Hoonan B	ack Ground Check Authorization
By my signature below I	, authorize the City of
Hoonah to conduct a criminal back	aground check as part of my application for the position
of,	with the City of Hoonah.
My social security number is	, and my date of birth is
·	
I voluntarily release the City of Ho	oonah and all law enforcement agencies providing this
information.	
Candidate Signature:	
Date:	