

QANIRTUUQ, INC.  
P.O. BOX 69  
QUINHAGAK, AK. 99655  
PHONE: (907) 556-8289  
APPLICATION FOR EMPLOYMENT

**CONFIDENTIAL !**

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DATE OF APPLICATION: \_\_\_\_\_

**PERSONAL INFORMATION**

<b>FULL NAME:</b>	<b>BIRTH DATE:</b>
<b>PRESENT ADDRESS:</b>	<b>HOW LONG?</b>
<b>PRESENT TELEPHONE#</b>	<b>VHF#</b>
<b>SOCIAL SECURITY#</b>	
<b>PERMANENT ADDRESS:</b>	<b>PERM. TELEPHONE#</b>

**EMPLOYMENT INTERESTS**

<b>TYPE OF EMPLOYMENT DESIRED, CIRCLE CHOICE(S)</b>				<b>SALARY EXPECTED</b>	<b>DATE AVAILABLE</b>
Regular	Full Time	Part Time	Substitute	Temporary	Casual
<b>JOB(S) PREFERRED:</b>	1ST				<b>NO. OF YEARS EXPERIENCE IN 1ST CHOICE</b>
	2ND				<b>NO. OF YEARS EXPERIENCE IN 2ND CHOICE</b>
<b>HAVE YOU APPLIED HERE BEFORE?</b>	YES _____ NO _____	<b>IF "YES", WHERE?</b>	<b>APPROX. DATE?</b>	<b>MO. _____</b> <b>YR. _____</b>	<b>HOW REFERRED TO US?</b>

**EDUCATION**

SCHOOLS	NAME AND ADDRESS OF SCHOOL OR COLLEGE	MAJOR STUDIES	DEGREE
HIGH SCHOOL			
COLLEGE TRADE, OR BUS. SCHOOLS			
<b>CLASS RANK</b>	<b>HIGH SCHOOL (CHECK ONE)</b> TOP QTR. ___ 2ND QTR. ___ 3RD QTR. ___ 4TH QTR. ___	<b>COLLEGE (CHECK ONE)</b> TOP QTR. ___ 2ND QTR. ___ 3RD QTR. ___	

**SPECIALIZED TRAINING OR SKILLS**

<b>TYPING SKILLS:</b>  W.P.M. _____	OFFICE MACHINES OPERATED  _____	<b>COMPUTER SKILLS:</b> BEGINNER _____ INTERMEDIATE _____ ADVANCED _____
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**ACTIVITIES**

<b>LIST ACTIVITIES OR COMMITMENTS WHICH MAY INTERFERE WITH ATTENDANCE REQUIREMENTS: (EXCLUDE THOSE WHICH INDICATE AGE, RACE, COLOR, RELIGION OR NATIONAL ORIGIN)</b>

**EMPLOYMENT EXPERIENCE:** (START WITH PRESENT OR MOST RECENT EMPLOYMENT RECORD FIRST. INCLUDE SUMMER OR SELF EMPLOYMENT AND IF NECESSARY LIST ON SEPARATE PAPER OR ATTACH RESUME.)

MO./DAY/YR.	EMPLOYER'S NAME & ADDRESS	NAME & TITLE OF SUPERVISOR	POSITION HELD & SALARY	REASON FOR LEAVING
FROM:	EMPLOYERS NAME			
TO:	ADDRESS			
FROM:	EMPLOYERS NAME			
TO:	ADDRESS			
FROM:	EMPLOYERS NAME			
TO:	ADDRESS			
FROM:	EMPLOYERS NAME			
TO:	ADDRESS			
FROM:	EMPLOYERS NAME			
TO:	ADDRESS			

**REFERENCES** (3 PERSONS TO WHOM YOU ARE NOT RELATED, HAVE NOT BEEN EMPLOYED BY AND HAVE KNOWN YOU FOR SEVERAL YEARS.)

NAME	ADDRESS	OCCUPATION	YRS KNOWN

**NAMES OF RELATIVES IN THE EMPLOY OF THIS COMPANY**

NAME	OCCUPATION	LOCATION	RELATIONSHIP

**ADDITIONAL INFORMATION OR COMMENT FOR PLACEMENT CONSIDERATION**


I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR HEREON WILL BE SUFFICIENT CAUSE FOR CANCELLATION OF CONSIDERATION FOR EMPLOYMENT OR DISMISSAL FROM THE COMPANY'S SERVICE IF I HAVE BEEN EMPLOYED. I UNDERSTAND THAT EMPLOYMENT IS SUBJECT TO A PHYSICAL EXAMINATION IN WHICH MY HEATH IS FOUND TO BE SATISFACTORY TO THE COMPANY. I UNDERSTAND THAT IF I AM EMPLOYED, A CERTIFIED BIRTH CERTIFICATE OR EVIDENCE OF BIRTHPLACE AND CITIZENSHIP IS REQUIRED. I UNDERSTAND THAT EMPLOYMENT WITH QANIRTUUQ, INC. IS AT WILL WHICH MEANS EITHER PARTY HAS THE RIGHT AT ANY TIME, WITH OR WITHOUT NOTICE AND WITH OR WITHOUT GOOD CAUSE, TO TERMINATE THE EMPLOYMENT RELATIONSHIP.

\_\_\_\_\_  
EMPLOYEE SIGNATURE

\_\_\_\_\_  
DATE