



Workforce Services

Department of Administration

Division of Personnel

PO Box 110201

Juneau, AK 99811

1-800-587-0430 (toll free)

907-465-4095 (ph) 907-465-2576 (fax)

recruitment.services@alaska.gov (email)

<http://workplace.alaska.gov>

The following list of items must be faxed, emailed, or delivered to the Division of Personnel before 5:00pm on the closing date of the position to be considered. If any of the required items are not provided the application will be considered incomplete and may not be considered for the recruitment. Please verify that you have included the following items:

- ☐ Job Posting
- ☐ Answered supplemental questions
- ☐ Paper application
- ☐ Additional information requested on Job Posting (Please check below)
 - ☐ Cover Letter
 - ☐ Transcripts
 - ☐ Writing Sample
 - ☐ Other (please list): _____

I certify that the items checked above have been submitted for this application. I understand that if I do not include a required item my application will be considered incomplete and may not be considered.

Name: _____ Email: _____

Contact Number: (_____) _____ Number of Pages included: _____

Signature: _____ Date: _____

The State of Alaska is an EEO/ADA employer. Individuals requiring accommodations should call 1-800-587-0430 or 465-4095 in Juneau or (907) 465-3412 (TTY).

STATE OF ALASKA STANDARD EMPLOYMENT APPLICATION

Workforce Services

Department of Administration
Division of Personnel
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Juneau, AK 99811

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907-465-4095 (ph) 907-465-2576 (fax)
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<http://workplace.alaska.gov>

(This section for official use only)

Received: _____



**Workplace
Alaska**

State of Alaska Online Recruitment System

Alaska...Great Land,

Great People,
Great Jobs!

**QUESTIONS WITH AN * REQUIRE A RESPONSE. YOUR APPLICATION MAY NOT BE CONSIDERED IF INCOMPLETE.
IF YOU REQUIRE MORE SPACE TO COMPLETE YOUR ANSWERS, ATTACH ADDITIONAL PAGES AS NEEDED.**

JOB INFORMATION

* JOB CODE (from the job posting):

* JOB TITLE:

CONTACT INFORMATION

* FIRST NAME

MIDDLE INITIAL

* LAST NAME

* ADDRESS

* CITY

* STATE

* ZIP

* PRIMARY PHONE

ALTERNATE PHONE

* EMAIL ADDRESS

* WHICH METHOD DO YOU PREFER TO BE NOTIFIED ABOUT YOUR
APPLICATION STATUS? ☐ EMAIL OR ☐ PAPER

EDUCATION - HIGH SCHOOL

DID YOU GRADUATE FROM HIGH SCHOOL OR RECEIVE A G.E.D.? YES ☐ NO ☐

IF NO, WHAT WAS THE HIGHEST LEVEL COMPLETED? 7 ☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐

SCHOOL NAME

CITY

STATE

EDUCATION - COLLEGE/UNIVERSITY

SCHOOL NAME

DEGREE RECEIVED

SCHOOL LOCATION (CITY/STATE)

DID YOU GRADUATE?
YES ☐ NO ☐

☐ SEMESTER ☐ QUARTER
OF UNITS COMPLETED:

MAJOR

SCHOOL NAME

DEGREE RECEIVED

SCHOOL LOCATION (CITY/STATE)

DID YOU GRADUATE?
YES ☐ NO ☐

☐ SEMESTER ☐ QUARTER
OF UNITS COMPLETED:

MAJOR

DRIVER'S LICENSE INFORMATION

* IF THE POSITION INVOLVES DRIVING, DO YOU HAVE A VALID LICENSE? YES ☐ NO ☐

STATE WHERE
ISSUED

CLASS

CERTIFICATES & LICENSES

TYPE

DATE ISSUED (MONTH/YEAR)

EXPIRATION DATE (MONTH/YEAR)

LICENSE NUMBER

ISSUING AGENCY

TYPE

DATE ISSUED (MONTH/YEAR)

EXPIRATION DATE (MONTH/YEAR)

LICENSE NUMBER

ISSUING AGENCY

*WORK HISTORY	
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DATES From	To	EMPLOYER	POSITION TITLE
ADDRESS		CITY	STATE
COMPANY WEBSITE		PHONE NUMBER	SUPERVISOR (NAME)
HOURS WORKED PER WEEK		MONTHLY SALARY	SUPERVISOR (TITLE)

DUTIES

REASON FOR LEAVING

<div> <div>DATES</div> <div>From</div> <div>To</div> </div>	EMPLOYER	POSITION TITLE	
ADDRESS	CITY		STATE
COMPANY WEBSITE	PHONE NUMBER	SUPERVISOR (NAME)	
HOURS WORKED PER WEEK	MONTHLY SALARY	SUPERVISOR (TITLE)	

REASON FOR LEAVING

WORK HISTORY	
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<div> <div>DATES</div> <div>From</div> <div>To</div> </div>	EMPLOYER	POSITION TITLE	
ADDRESS	CITY		STATE
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HOURS WORKED PER WEEK	MONTHLY SALARY	SUPERVISOR (TITLE)	

DUTIES

REASON FOR LEAVING

DATES	EMPLOYER	POSITION TITLE
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From	To		
ADDRESS		CITY	STATE
COMPANY WEBSITE		PHONE NUMBER	SUPERVISOR (NAME)
HOURS WORKED PER WEEK		MONTHLY SALARY	SUPERVISOR (TITLE)

DUTIES

REASON FOR LEAVING

***If you need more than 4 WORK HISTORY spaces, add additional pages ***

ADDITIONAL INFORMATION

Clinical Experience, Honors & Awards, Interests & Activities, Military Service, Personal, Professional Associations, Professional Memberships, Publications, Technical, Volunteer Experience, Other/Miscellaneous

REFERENCES

Please list references you wish to include (Personal/Professional). Please include: Name, title, phone number, email, and mailing address.

AGENCY WIDE QUESTIONS

The purpose of the following questions is to obtain additional job related information to evaluate you for the position "TO WHICH" you are applying or to provide us with statistics needed to evaluate our recruitment program as well as to prepare statistical reports required by Federal, State and local agencies. **You must answer all questions which are marked with an *.**

1. *Are you currently an Alaska resident?

- ☐ Yes – I meet the residency requirements as certified below.
- ☐ No – I do not meet the residency requirements described below. I've verified this position is open to All Applicants and I'm applying as a non-resident.

2. If you answered "Yes" to the above question you must verify how you meet State of Alaska residency requirements.

I certify I meet State of Alaska residency requirements as follows: (Please check all that apply)

- ☐ Currently domiciled in the State of Alaska
- ☐ Presently serving in the military with the intent of being domiciled in the State of Alaska upon completion of military service. If asked I will provide a DD Form 2058.
- ☐ Graduated from an accredited high school or post-secondary institution in the State of Alaska, or earned a General Equivalency Diploma (GED) while domiciled in Alaska.
- ☐ Presently enrolled in a post-secondary institution AND physically present in Alaska.

3. *Do you have a legal right to accept employment in the United States?

- ☐ Yes ☐ No

4. *If you are a man ages 18 through 25 and living in the U.S. you are required to register with Selective Service. It's the law. You may be denied employment if you have not registered.

Have you complied with this requirement?

- ☐ Yes
- ☐ No
- ☐ Not Applicable to Me

5. *Have you ever been convicted of a felony?

Note: For purposes of application with the State of Alaska this includes **all** convictions, even if you have received and/or completed a Suspended Imposition of Sentence, and even if the conviction has been set aside or expunged.

A criminal conviction, whether misdemeanor or felony, will not automatically disqualify or exclude you from employment with the State of Alaska.

You are required to provide true and complete information during the recruitment and selection process. If you intentionally or unintentionally conceal or otherwise provide a false statement of material fact in your application submission it will result in permanent loss of eligibility for employment with the State of Alaska.

If you are selected to advance to the interview phase you will need to provide a copy of your judgment when asked. The judgment will be used to determine if there is a nexus to the position prior to advancement.

Felony conviction? If yes, you must answer the question below.

☐ Yes ☐ No

6. If you answered "Yes" to the felony conviction question you must provide an explanation including date and type of conviction(s):

7. *Have you been convicted of a misdemeanor within the past five (5) years?

Note: For purposes of application with the State of Alaska this includes **all** convictions, even if you have received and/or completed a Suspended Imposition of Sentence, and even if the conviction has been set aside or expunged.

A criminal conviction, whether misdemeanor or felony, will not automatically disqualify or exclude you from employment with the State of Alaska.

You are required to provide true and complete information during the recruitment and selection process. If you intentionally or unintentionally conceal or otherwise provide a false statement of material fact in your application submission it will result in permanent loss of eligibility for employment with the State of Alaska.

Misdemeanor conviction? If yes, you must answer the question below.

☐ Yes ☐ No

8. If you answered "Yes" to the misdemeanor conviction question you must provide an explanation including date and type of conviction(s):

9. If you are currently a State of Alaska employee, identify your Bargaining Unit. If your

Bargaining Unit is not listed select "not listed."

- ☐ General Government
- ☐ Supervisory
- ☐ Confidential
- ☐ Labor, Trades & Crafts
- ☐ Correctional Officers
- ☐ Public Employees Safety Association
- ☐ Not Listed

10. If you are a current or former State of Alaska employee, do you have Transfer or Rehire rights to the job class to which you are applying?

- ☐ Yes ☐ No

11. *Are you related to any person currently working for the department of the position to which you are applying?

Note: All applicants are required to disclose this information. State Policy prohibits employees from being in an employment relationship with an immediate family member, including a conjugal relationship that is not a legal marriage or with an individual who is related within and including the second degree of kindred.

If you answer "Yes", you must disclose the employee's name and your relationship if you are selected for an interview.

- ☐ Yes ☐ No

12. *Do you have any periods of State of Alaska employment that are not documented in the Work Experience section of your application?

Note: If "Yes", you are required to disclose this information in the section provided below.

- ☐ Yes ☐ No

13. Periods of State of Alaska employment not listed in the Work Experience section of my application are:

14. VETERANS' PREFERENCE:

Affirmative Action Notice to Veterans: The State of Alaska awards a hiring preference to qualified veteran applicants in accordance with Alaska Statute 39.25.159. This preference applies to qualified applicants who apply for positions open to "Alaska Residents Only" or "All Applicants." The State asks applicants to VOLUNTARILY disclose their veteran status. Disclosure is not required. If a veteran does not disclose his or her veteran status, no adverse action is taken. The information is used solely for affirmative action purposes and is confidential.

VETERAN / ALASKA NATIONAL GUARD:

Are you a veteran or member of the Alaska National Guard? Answer YES or NO below.

If "No" please proceed to the Equal Employment Opportunity Survey below.

If "Yes" you must answer this question and "Yes" to one of the following TWO questions to receive the employment preference.

Veteran?

☐ Yes ☐ No

15. Are you a veteran or a member of the National Guard as described by either option "A" or "B" below?

A) Veteran is defined in Alaska Statute as:

(1) A person with 181 days or more active service in the armed forces of the United States who has been honorably discharged after having served during any period:

(a) between April 6, 1917 and December 1, 1919, between September 16, 1940 and December 31, 1947, or between June 27, 1950 and October 14, 1976, between August 2, 1990, and January 2, 1992, beginning September 11, 2001, and ending on the day prescribed by Presidential proclamation or by law as the last date of Operation Iraqi Freedom, or during any time period listed in 5 U.S.C. 2108(1); or
(b) in which the person was awarded a campaign badge, expedition medal, the Purple Heart, or an award or decoration for heroism or gallantry in action.

(2) who served 181 days or more in the Alaska Territorial Guard.

B) Member of the National Guard means a person who is presently serving as a member of the Alaska National Guard and who has at least eight years of service in the Alaska National Guard.

Do you certify that you meet the criteria described in either option A or B in this section, and therefore entitled to this employment preference?

☐ Yes ☐ No

16. Are you a disabled veteran or former prisoner of war as described below?

Disabled veteran means a veteran who is entitled to compensation under laws administered by the U. S. Department of Veterans Affairs, a person who was honorably discharged or released from active duty because of a service-connected disability, or a person who was disabled in the line of duty while serving in the Alaska Territorial Guard.

Prisoner of war means a person who has been a prisoner of war during a declared war or other conflict as determined by the U. S. Department of Defense under federal regulations.

Do you certify that you are a disabled veteran or former prisoner of war as described in this section, and therefore entitled to this employment preference?

☐ Yes ☐ No

16. Are you a former federal worker (or federal contractor) affected by federal workforce reductions?

☐ Yes ☐ No

17. How did you learn of this job opening? (Check all that apply)

- ☐ Alaska.Jobs
- ☐ Alaska Job Center
- ☐ ALEXsys - Alaska's Job Bank
- ☐ Alaska Native Business & Resource Directory Advertisement
- ☐ Alaska Native Job Bank Advertisement
- ☐ Current or Former Employee
- ☐ Friend or Family Member
- ☐ Flyer
- ☐ Job Fair
- ☐ News
- ☐ Online Job Boards (i.e. Alaska List, Career Builder, Craigslist, Dice.com, Monster, etc.)
- ☐ Professional Association/Membership/Affiliation
- ☐ Professional Magazine
- ☐ Radio
- ☐ School or College Counselor or Other Official
- ☐ Social Networking (i.e. Twitter, LinkedIn, Facebook, etc.)
- ☐ State of Alaska Department or Agency Internet Recruitment Site
- ☐ State of Alaska Division of Vocational Rehabilitation
- ☐ State of Alaska Recruiter
- ☐ State of Alaska Website
- ☐ Television
- ☐ Workplace Alaska Job Openings
- ☐ Word of Mouth
- ☐ Other - Please complete text box below.

18. If you answered "Other" to the question above or have any additional specific information regarding this topic please enter your response here.

**19. Equal Employment Opportunity Survey
Applicant Demographic Information**

Important Note: Your privacy is protected. Your voluntary responses are treated in a highly CONFIDENTIAL manner. Your answers are NOT released to the hiring manager or hiring panel. The information is visible only to Human Resource staff, consistent with State and Federal equal employment opportunity laws.

What is your sex?

☐ Female ☐ Male

20. What is your date of birth? (mm/dd/yyyy)

21. What is your race/ethnicity?

Note: Please select the one category with which you most identify.

- ☐ Alaska Native - All persons having origins in any of the original peoples of Alaska and who maintain cultural identification through tribal affiliation or community attachment. The term "Alaska Native" represents many separate groups of people with distinct ethnic and cultures throughout Alaska. Alaska Native peoples include Inupiaq, Yup'ik/Cup'ik, Alutiiq, Aleut, Eyak, Athabaskan (comprising eleven cultural and linguistic groups), Tlingit, Haida, and Tsimshian.
- ☐ African American / Black (not of Hispanic origin) - All persons having origins in any of the Black racial groups of Africa.
- ☐ American Indian / Native American - All persons having origins in any of the original peoples of the Americas and who maintain cultural identification through tribal affiliation or community attachment. The term "American Indian/Native American" represents many separate groups of people with distinct ethnic and cultures throughout the lower 48.
- ☐ Asian or Pacific Islander - "Asian" refers to all persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent. This includes, for example, China, India, Japan, Korea, and the Philippine Islands. "Pacific Islander" refers to people having origins in any of the original peoples of Hawaii, Guam, Samoa, Mariana Islands, or other Pacific Islands.
- ☐ Hispanic / Latino - All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- ☐ White / Caucasian (not of Hispanic origin) - All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

APPLICANT DECLARATIONS

Please read carefully before submitting this document:

I *certify* the information I have entered on this form is true to the best of my knowledge. I understand if I conceal or enter false information on this form, my name may be removed from consideration for a job, or I may be removed from my job, if hired. I understand the information in this profile may be released in an authorized legal investigation; and before I am hired I will be required to sign an official State Form certifying these statements are true. I agree that the State of Alaska, or its agents, may contact current or former employers or other persons who know me in order to obtain additional information.

This application, a printed copy of the job posting with any supplemental questions answered, and any required documentation must be submitted, **prior to the position closing**, to:

Recruitment Services

Department of Administration
Division of Personnel
PO Box 110201
Juneau, AK 99801-0201

Juneau: 907-465-4095
Toll Free: 800-587-0430
Fax: 907-465-2576
Email: recruitment.services@alaska.gov

The State of Alaska complies with Title I of the Americans with Disabilities Act (ADA). Individuals with disabilities, who require accommodation, auxiliary aides or services, or alternative communication formats, please call 1-800-587-0430 or 465-4095 in Juneau or (907) 465-3412 (TTY) or correspond with the Division of Personnel at the address above.

The State of Alaska is an equal opportunity employer.

X _____
SIGNATURE OF APPLICANT DATE