Bristol Bay Housing Authority

PO Box 50 Dillingham, AK 99576 (907)842-5956 phone (907)842-2784 fax

Employment Application for Construction/Building Positions

Please use typewriter or ir	nk pen.								
Position Being Applied For:				Salary Expected:					
Name:	First		Middle	Social Sec	urity No.:				
Address:				Home Pho	ne Number:				
	Street and/or PO B	lox							
		<u> </u>	7: 6 1	еN	Mail Address:				
City		State	Zip Code						
Have you been convicted yes no if "Yes	of a misdemeano s" explain:	or in the pa	st five years	or a felony i	n the past ten	years?:			
Do you have a valid Alaska	a Driver's License	?: [yes [no Lic	ense No.:				
If hired, when can you rep	ort for work?:								
Education and Experience	:								
Circle Highest Year of Scho	ool Completed:	1	2 3	4 5	6 7 8	9 10	11	12	
Name and Address of Scho	ool Last Attended	:							
Date Last Attended:				High :	School Gradua	ite?:			
High School Equivalency (GED)?:	yes 🗌 no	o Certifica	ate Date & Nu	ımber:				
List any high school course			sition vou a	are applying f	or:				
, 0		•	,	11 / 6	-				
Education or Training afte	er High School:								
		No	o. of	Other	Degree &				
Name & Location	Dates Attended	Qtr. Hrs.	Sem. Hrs.	Graduate?	Year	Major	or Subj	ect	
List Types of Electronic or	Mechanical Equip	oment or M	Nachines tha	at you are qua	alified to opera	ate:			
Operate:			Ren	pair:					

Employment History: Include all jobs within past five years. Give earlier job history if pertinent to job applied for. Include any period of unemployment over three months in length. Use additional pages if needed to give complete history. Start with last or present position and work backwards.

Employer:	From: To:
Employer Address:	
	Starting Salary:per
Job Title:	Final Salary:per
Duties:	No. Employees Supervised:
	Supervisor:
	May We Contact This Employer:
Reason for Leaving:	
Employer:	From: To:
Employer Address:	Hours Per Week:
	Starting Salary:per
Job Title:	Final Salary:per
Duties:	No. Employees Supervised:
	Supervisor:
	May We Contact This Employer:
Reason for Leaving:	
Employer:	From: To:
Employer:	
Employer:	Hours Per Week: Starting Salary:per
Employer:Employer Address:	Hours Per Week: Starting Salary: per Final Salary: per
Employer: Employer Address: Job Title:	Hours Per Week: Starting Salary: per Final Salary: per
Employer: Employer Address: Job Title:	Hours Per Week: Starting Salary: per Final Salary: per No. Employees Supervised:
Employer: Employer Address: Job Title:	Hours Per Week: Starting Salary: per Final Salary: per No. Employees Supervised: Supervisor:
Employer: Employer Address: Job Title: Duties:	Hours Per Week: Starting Salary: per Final Salary: per No. Employees Supervised: Supervisor: May We Contact This Employer:
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Employer: Employer Address: Job Title: Duties: Reason for Leaving: Employer:	Hours Per Week: Starting Salary: per Final Salary: per No. Employees Supervised: Supervisor: May We Contact This Employer: From: To:
Employer: Employer Address: Job Title: Duties: Reason for Leaving: Employer:	Hours Per Week: Starting Salary: per Final Salary: per No. Employees Supervised: Supervisor: May We Contact This Employer: From: To: Hours Per Week:
Employer: Employer Address: Job Title: Duties: Reason for Leaving: Employer: Employer Address:	Hours Per Week: Starting Salary: per Final Salary: per No. Employees Supervised: Supervisor: May We Contact This Employer: From: To: Hours Per Week: Starting Salary: per Final Salary: per
Employer: Employer Address: Job Title: Duties: Reason for Leaving: Employer: Employer Address: Job Title:	Hours Per Week: Starting Salary: per Final Salary: per No. Employees Supervised: Supervisor: May We Contact This Employer: From: To: Hours Per Week: Starting Salary: per Final Salary: per
Employer: Employer Address: Job Title: Duties: Reason for Leaving: Employer: Employer Address: Job Title:	Hours Per Week: Starting Salary: per Final Salary: per No. Employees Supervised: Supervisor: May We Contact This Employer: From: To: Hours Per Week: Starting Salary: per Final Salary: per No. Employees Supervised:

Building and Construction Trades Manpower File

Complete the form by filling in the requested information. The Bristol Bay Housing Authority will keep this information on file. The file will be used as a reference and a source form which to draw personnel to provide Force Account labor for future Development housing construction and modernization/rehabilitation work to be performed under the Comprehensive Grant Program.

Should your situation change (i.e. - you move, your address or telephone number changes, you are going to be absent for long periods of time, you become permanently employed) please notify the BBHA office so that your file can be updated.

Name:				Phone No.:	
	Last	First N	Middle		
Address:		Street and/or PO Box	Alternate	Phone No.:	
		Street and, or 1 & Son	eM	ail Address:	
_	City	State	Zip Code		
I am normall	ly available for w	ork from (month)		to (month)	
		ling or construction trades onstruction trades:	as indicated; or, I am	very interested in	receiving training
			Apprentice Rating	Journeyman Rating	Desire Training
Carpenter		years experience			
Plumber		years experience			
Electrician		years experience			
Painter		years experience			
Mason (Dryv	wall)	years experience			
Finisher (Cor	ncrete)	years experience			
Pile Driver		years experience			
Roofer		years experience			
Sheet Metal		years experience			
Heavy Equip	ment	years experience	Teamster?	yes no	
Laborer		years experience			
I have experi	ience as a	project jobsite fore	man.		
List any speci	ial building or co	nstruction trades training o	or experience you ma	y have had:	

If you claim Native prefe Authority with documen background if you claim	tation	of your ethnic ba	•		the Bristol Bay Housing ase indicate below your ethnic
		Alaska Native			American Indian
READ CAREFULLY BEFO	RE SIG	GNING BELOW:			
company and further agr any time, with or withou Authority or myself. I ur	ee tha it caus idersta	at my employmer se or notice, at the and and agree tha	nt and comp e option of at I am emp	pens eith oloye	
and complete to the best withheld any fact or circu of material fact will be su	of multiple of motion of the contract of the c	y knowledge and nce. I understand on ground for the present and previous they may had by release said er the saree to say	belief and a that any many rejection of the coursemploy ave regarding ployers from	that nisre f thi vers t ng m	epresentation or concealment s application or removal from to release to the Bristol Bay my character or my any damage or claim for
Applicant's Signature					Date

Waiver and Authorization to Release Information

I authorize you to furnish the Bristol Bay Housing Authority with any and all information that you have concerning me and my work/employment records. Information of a confidential or privileged nature may be included. Your reply will be used to assist in determining my qualifications for the position I am seeking. I further understand that the information you furnish will not be disclosed to any person or organization not connected with Bristol Bay Housing Authority's hiring practices, including myself.

I understand my rights under Title 5, United States Code, Section 552A, the Privacy Act of 1974, and waive those rights with the understanding that information furnished will be used by the Bristol Bay Housing Authority and retained by them in confidence.

By signing this form I also authorize Bristol Bay Housing Authority to have access to my criminal records, if any.

I hereby release you, your organization or the police department from any liability or damage which may result from furnishing the information requested.

Applicant's Printed Name	
Social Security Number	
Driver's License Number	
Applicant's Signature	Date