THE LAKE AND PENINSULA SCHOOL DISTRICT
101 Jensen Drive
P.O. Box 498
King Salmon, Alaska 99613
Phone (907) 246-4280 / Fax (907) 246-4473



Classified Employment Application

DATE: _____

NAME: _____

MAILING ADDRESS: _____
(Street of Box Number)

_____
(City) (State) (Zip Code)

TELEPHONE: (_____) _____ - _____ Email: _____

Position Applying For: _____

If hired - When could you report for work: _____

EDUCATION: High School Graduate: ____YES ____NO Name of High School: _____

High School Equivalency (GED): ____YES ____NO H.S. Graduation Year: _____

College or Training Beyond High School:

Name of Facility Major or Course(s) Taken Degree (*type and date awarded*)

_____

_____

_____

Have you been convicted of a misdemeanor in the past 5 years: ____YES ____NO

Have you EVER been convicted of a felony? ____YES ____NO

Have you ever been accused or convicted of inappropriate behavior involving a child? ____YES ____NO

If you have answered yes to any of the above, please provide further explanation:

_____

_____

Do you have a valid Alaska Driver's License: ____YES ____NO License #_____

Are You Authorized to Work in The United States? ____YES ____NO

REFERENCES

1. _____
NAME ADDRESS

_____
CONTACT/TELEPHONE NUMBER POSITION

2. _____
NAME ADDRESS

_____
CONTACT/TELEPHONE NUMBER POSITION

3. _____
NAME ADDRESS

_____
CONTACT/TELEPHONE NUMBER POSITION

PREVIOUS EMPLOYMENT HISTORY
Start with Present or Last Employer

Employing Firm	Telephone #	Dates Employed (from/to)	Position Held	Supervisor

Persons applying for a position may attach additional information on past Education, Training, Work Experience, copies of any Certificates or Degrees or any Recommendations.

I CERTIFY THAT the information provided on this application is true and complete to the best of my knowledge and that I have not knowingly withheld any fact of circumstance. I understand that any misrepresentation or concealment of material fact will be sufficient grounds for rejection of my application or removal from employment.

SIGNATURE OF APPLICANT_____ DATE _____