



## Employment Application

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

**APPLICATION MUST BE FILLED OUT COMPLETELY. DO NOT PUT "SEE RESUME."**

**PERSONAL:**

Name: \_\_\_\_\_  
First
Middle
Last
Maiden Name

Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
 \_\_\_\_\_ Home Phone: \_\_\_\_\_

Are you legally eligible for employment in the US? Yes \_\_\_ No \_\_\_ (If hired, verification will be required)

Social Security #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_ No \_\_\_

If "yes", please explain: \_\_\_\_\_

**POSITION PREFERENCES:**

Position applying for: \_\_\_\_\_

Salary desired: \$ \_\_\_\_\_ Schedule desired: Full Time \_\_\_ Part Time \_\_\_

Date you could start: \_\_\_\_\_ Could you travel if required for the position? Yes \_\_\_ No \_\_\_

**EDUCATION:**

School Name/Location	Yrs. Completed	Degree Awarded	GPA
High School			
College			
College			
Graduate			

List any additional certificates or training applicable to the position for which you are applying (include any expiration dates): \_\_\_\_\_

**EMPLOYMENT:**

Primary Occupation (what do you have the most experience or training in?): \_\_\_\_\_

Secondary Occupation (if you have training and/or experience in another field): \_\_\_\_\_

List your current or most recent employment first (DO NOT PUT "SEE RESUME"):

Employer Name & Address:	Position Title/Duties:	Dates Employed: From: _____ To: _____  Salary:
Supervisor's Name & Telephone #:		Reason For Leaving:

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Supervisor's Name & Telephone #:		Reason For Leaving:

Do you have any relatives that work for AE, LLC? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes" please provide Names/Relationships: \_\_\_\_\_

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**U.S. MILITARY SERVICE:**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Rank: \_\_\_\_\_

**PROFESSIONAL REFERENCES:**

Please list three professional references (REQUIRED):

Name	Address/Phone	Relationship

**RELEASES AND APPLICANT’S SIGNATURE:**

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from Aleut Enterprise, LLC and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

\_\_\_\_\_  
Initials

**All hiring and employment at Aleut Enterprise, LLC is at will.** I understand this application is not an employment contract, nor can it be used to create one. Employment by Aleut Enterprise, LLC has no specific term and may be terminated by the employee or Aleut Enterprise, LLC with or without notice. I acknowledge that Aleut Enterprise, LLC has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with Aleut Enterprise, LLC, and that failure to provide this evidence will result in the termination of my employment.

I release and agree to hold harmless any individual, company, business institution or government agency from all liability with regard to furnishing information to Aleut Enterprise, LLC I agree to release and hold harmless Aleut Enterprise, LLC from all liability with respect to the receipt of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with Aleut Enterprise, LLC may be terminated.

\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Date

**APPLICANT RELEASE:**

Please submit a resume with this Employment Application.

In connection with my application for employment (including contract for services) and as a condition of continuing employment, I understand that investigative background inquiries are to be made on me including consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, and experience along with reasons for termination of employment from previous employers. Further I understand that the company will be requesting information from various Federal, State, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies.

I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from Aleut Enterprise, LLC and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

\_\_\_\_\_

Applicant's Signature

\_\_\_\_\_

Date

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*The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose:*

Please Print Clearly:

Print Full Name: \_\_\_\_\_

Print other names you have used: \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

**VOLUNTARY INFORMATION:**

In compliance with Federal and State Equal Employment Opportunity laws, qualified applicants are considered for employ without regard to race, color, religion, sex, national origin, military status, age, marital status, or the presence of a non-job-related medical condition or handicap.

So that we can comply with Federal/State Equal Opportunity Employment record keeping requirements:

Are you a US Citizen? Yes \_\_\_\_\_ No \_\_\_\_\_

If not, do you possess an alien (work) registration card? Yes \_\_\_\_\_ No \_\_\_\_\_

Race/Ethnic Group: \_\_\_\_\_ Caucasian  
\_\_\_\_\_ Black  
\_\_\_\_\_ Hispanic  
\_\_\_\_\_ American Indian  
\_\_\_\_\_ Asian/Pacific Islander  
\_\_\_\_\_ Alaska Native  
\_\_\_\_\_ Aleut Corporation Shareholder  
Shareholder Spouse/Descendant (circle one)

Sex: \_\_\_\_\_ Male  
\_\_\_\_\_ Female

Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Other Explain: \_\_\_\_\_

Are you a Vietnam era veteran? Yes \_\_\_\_\_ No \_\_\_\_\_ Service: From \_\_\_\_\_ To \_\_\_\_\_

Are you a disabled veteran? Yes \_\_\_\_\_ No \_\_\_\_\_ VA Disability Rate \_\_\_\_\_