



Solutions for the Future

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**NUSHAGAK ELECTRIC & TELEPHONE COOPERATIVE, INC.
("NUSHAGAK COOPERATIVE")
EMPLOYMENT APPLICATION NOTICE AND INSTRUCTIONS**

THIS APPLICATION SHOULD BE USED FOR ALL NUSHAGAK COOPERATIVE POSITIONS.

1. Complete the application form and fill out all applicable sections.

Please be thorough when completing this application, particularly the description of duties sections from your prior jobs. **Please do not use "See Resume."** Resumes are welcome, but do not replace a fully completed and signed application. Incomplete applications will not be accepted.

Nushagak Cooperative only accepts applications for open or advertised positions.

Applications are valid only for 90 days from the date completed.

Finished applications can be submitted to Nushagak Cooperative at:

- E-mail to alopez@nushagak.coop
- Facsimile to (907) 842-2799 or
- Mail to Nushagak Cooperative, P.O. Box 350, Dillingham, Alaska 99576.

2. Nushagak Cooperative provides equal employment opportunities to all employees and applicants and prohibits discrimination and harassment of any type based on race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws.

This applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, fringe benefits and training.

3. If you require reasonable accommodation in the application or interview process, please contact the Cooperative's Human Resources Generalist at 907-842-5251.
4. Any offer of employment from Nushagak Cooperative is contingent upon the applicant passing a background check, a pre-employment drug test, and a medical examination if one is required by the position. Additionally, applicants for positions requiring a commercial driver's license (CDL) must pass a post-offer drug and alcohol test and other Department of Transportation (DOT) screening requirements.

NETC Date Received: _____

NUSHAGAK ELECTRIC & TELEPHONE COOPERATIVE, INC.

EMPLOYMENT APPLICATION

EMPLOYMENT DESIRED

Position(s) desired: _____

Type of employment: Full-time Part-time Temporary Seasonal

If Temporary or Seasonal, **list start and end dates:** _____

Available for: Weekends Holidays Rotating Shifts On-Call

Can you work any shift? Yes No If no, explain: _____

Can you work overtime? Yes No If no, explain: _____

If you did not check weekends and/or holidays, please explain: _____

Please use a separate sheet of paper if necessary

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____ Date _____

Mailing Address: _____

Physical Address: _____

E-mail Address _____

Home Phone # _____ Mobile Phone # _____

Are you eligible to work in the United States? Yes No

(If hired, you must provide proof of identity and authorization to work in the U.S.)

Are you at least 18 years or older? Yes No

If No, you may be required to provide authorization to work.

If No, what is your current age? _____

Are you related to anyone who works for Nushagak Cooperative, or is on our Board of Directors? Yes No If yes, state who: _____

Have you ever worked for Nushagak Cooperative before? Yes No

If Yes, please explain: _____

Are you currently employed? Yes No

If so, may we inquire of your present employer? Yes No

PERSONAL INFORMATION, CONTINUED

If hired, the date you can start _____

Answer if driving is required for the position for which you have applied :

Can you provide a valid Alaska driver’s license? ___ Yes ___ No
 (A copy of your driving record will be required post-offer)

Do you have a current Commercial Driver’s License (CDL)? ___ Yes ___ No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ___Yes ___No

| EDUCATION | Name and location of school | Degree Received | Subjects studied/Major | Years Completed |
|-------------------------------------|------------------------------------|------------------------|-------------------------------|------------------------|
| High School | | | | |
| College or University | | | | |
| College or University | | | | |
| Trade, Business or Technical School | | | | |
| Trade, Business or Technical School | | | | |

Have you ever been convicted of (including having pled guilty to or no contest to) any crime(s) or offense(s) other than a traffic violation? ___Yes ___No

NOTE: A “yes” answer is not an automatic bar to employment; each situation is considered on its own merits.

If yes, give details, including date(s) of conviction(s), whether local, state or federal matter, and where such conviction occurred. _____

Please use a separate sheet of paper if necessary

EMPLOYMENT HISTORY

Please list the following information for your current and past employers, including any periods of unemployment, **starting with the most recent** and working backwards in time. **Please do not use "See Resume."** Please use a separate sheet of paper if necessary. *Incomplete information could disqualify you from further consideration.*

| | | | |
|------------------------------|-----------|---|---|
| From | To | Employer Name | Telephone |
| Job Title | | Address | |
| Immediate supervisor & title | | Summarize the nature of work performed and job responsibilities | |
| | | Hourly Rate/Salary | Starting: Leaving: |
| Reason for leaving | | | |
| From | To | Employer Name | Telephone |
| Job Title | | Address | |
| Immediate supervisor & title | | Summarize the nature of work performed and job responsibilities | |
| | | Hourly Rate/Salary | Starting: Leaving: |
| Reason for leaving | | | |

| | | | |
|------------------------------|-----------|---|---|
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| Job Title | | Address | |
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| Reason for leaving | | | |
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| Job Title | | Address | |
| Immediate supervisor & title | | Summarize the nature of work performed and job responsibilities | |
| | | Hourly Rate/Salary | Starting: Leaving: |
| Reason for leaving | | | |

Please use a separate sheet of paper if necessary

Have you ever been involuntary terminated from employment or asked to resign by an employer? ___Yes ___No

If yes, please provide company name(s) and details _____

Do you have any special skills, experience, licenses, certifications and/or training that would enhance your ability to perform the position applied for? If yes, explain.

REVIEW YOUR APPLICATION FOR COMPLETENESS AND ACCURACY

Please read carefully before signing.

I understand that neither the submission of this application nor any other part of the consideration for employment establishes any obligation for Nushagak Cooperative to hire me, that no employment contract is being offered; and that if I am offered employment, **such employment is “at-will” and is for no definite period of time.**

I attest with my signature below that I have given to Nushagak Cooperative true and complete information on this application. No requested information has been concealed or deliberately omitted. I authorize Nushagak Cooperative, including its employees and agents, to verify all information given in this application and to investigate my entire work history, and I will sign all required background check authorization forms. If any information I have provided is untrue, or if I have concealed information, I understand that this may result in denial of employment or immediate dismissal.

If offered employment with Nushagak Cooperative, I agree to submit to such drug and/or alcohol testing and medical examinations as Nushagak Cooperative may require for the position. I understand that positive test results or refusal to consent to these tests will disqualify me from employment. I agree that should I fail any medical examination, I may not be hired or retained, or if hired, I could be discharge.

I hereby authorize the Department of Public Safety, Division of Motor Vehicles to release my driving record to Nushagak Cooperative and/or its insurance carrier but recognize I may also be required to provide my driving record to Nushagak Cooperative.

Date _____ Signature _____

THIS APPLICATION IS VALID ONLY FOR 90 DAYS FROM THE ABOVE DATE.

NUSHAGAK ELECTRIC & TELEPHONE COOPERATIVE, INC.

DISCLOSURE OF BACKGROUND CHECKS & RELEASE OF INFORMATION

1. This is notice to you that Nushagak Electric & Telephone Cooperative, Inc. (“NETC”) requires you to consent and authorize NETC to conduct background checks on you as a condition of being considered for a position at NETC, and, if hired, for NETC to conduct additional background checks on you for legal employment purposes while you are a NETC employee.

2. The background checks may include the ordering of background reports and the verification of information submitted on your application, resume or otherwise provided by you. The types of information in the background checks may include, but are not limited to, criminal and civil records, public records, educational records, driving and motor vehicle records, licensing and certification records, credit reports, reference and prior employment checks and social security number verifications.

**YOUR AUTHORIZATION AND CONSENT TO BACKGROUND CHECKS
AND RELEASE OF INFORMATION**

3. I have read and understand the above Disclosure of Background Checks paragraphs 1 & 2, and by my signature below, I authorize NETC and any of its agents, attorneys and third party providers to conduct the background checks described above.

4. I also authorize any and all corporations, current and former employers, credit agencies, educational institutions, law enforcement agencies; city, state, county and federal courts, and military services and all other organizations and agencies to release information about my background, including but not limited to the information listed above in paragraph 2, to NETC, its agents, attorneys and third party providers.

5. I agree that a photocopy of my original signature on this document shall have the same force and effect as my original signature.

Applicant Name (First, Middle & Last)

Date

Signature

Social Security Number

Address (Permanent Street Address)

Driver’s License No. State

City and County

Phone

State and Zip Code

Date of Birth

Most Recent E-mail Address