

# The Kuskokwim Corporation

## Talent Bank Application

*Shaded Area for Office Use Only*

<b>Applicant Code:</b>		<b>Enrollment #:</b>	
<b>Date Application Received</b>	<b>Date Application was Coded:</b>	<b>Date Application was entered into computer:</b>	
<b>By:</b>	<b>By:</b>	<b>By:</b>	

1. First Name	2. Last Name (Jr., Sr., II, etc.)	3. Middle Initial
4. Mailing Address ( Street or P.O. Box)		City
		State
		Zip

5. Home Phone # ( )	6. Daytime Phone # ( )	7. E-mail Address? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, E-mail Address:
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8. Social Security #:	9. Date of birth: / /	10. Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married
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11. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	12. Check all that apply	
	<input type="checkbox"/> Alaska Native	<input type="checkbox"/> Athabascan Indian
	<input type="checkbox"/> Yupik Eskimo	<input type="checkbox"/> Caucasian
		<input type="checkbox"/> American Indian
		<input type="checkbox"/> Other _____

<b>13. Military Status</b>
Branch of Service: _____ From: _____ To: _____
Present military affiliation: <input type="checkbox"/> None <input type="checkbox"/> Active Reserve <input type="checkbox"/> Inactive Reserve <input type="checkbox"/> ANG;
Rank/grade: _____
Kinds of training and duty while in service: _____

<p>14. Are you a TKC shareholder?          YES NO  <input type="checkbox"/> <input type="checkbox"/></p> <p>(If not, please give the name of your spouse or relative who is a shareholder, and describe your relationship to the shareholder i.e. spouse, child, brother, uncle, etc.)</p> <p>Name of TKC shareholder relative:          _____</p> <p>relationship: _____</p>	<p>15. <input type="checkbox"/> YES, I am seeking Employment</p> <p><input type="checkbox"/> Full-time permanent      <input type="checkbox"/> Part-time  <input type="checkbox"/> Summer Youth                <input type="checkbox"/> Temporary  <input type="checkbox"/> Seasonal</p> <p><input type="checkbox"/> No, I am not currently seeking employment but would like to be included in your talent bank and notified of any upcoming positions I may be qualified for.</p>
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16. Availability for work: Willing to work

All Shifts       Day       Swing       Night       Rotating       Split

Willing to Relocate?                       No                       Yes

If Yes, where would you prefer?  
 \_\_\_\_\_

**17. Check the work you think you are best qualified for (You may check more than one)**

<input type="checkbox"/> Office/Clerical	<input type="checkbox"/> General Labor	<input type="checkbox"/> Accounting	<input type="checkbox"/> Welder
<input type="checkbox"/> Management	<input type="checkbox"/> Heavy Equip. Operator	<input type="checkbox"/> Janitorial	<input type="checkbox"/> Driller/Helper
<input type="checkbox"/> Retail Sales	<input type="checkbox"/> Fuel Distribution	<input type="checkbox"/> General Construction	<input type="checkbox"/> Engineering
<input type="checkbox"/> Customer Service	<input type="checkbox"/> Sales	<input type="checkbox"/> Education	<input type="checkbox"/> Cook/Helper
<input type="checkbox"/> Data Entry	<input type="checkbox"/> Computer Programming	<input type="checkbox"/> Geotechnical	<input type="checkbox"/> Other, _____

**18. Training and Education**

Circle the highest grade completed:                      College

1 2 3 4 5 6 7 8 9 10 11 12                      1 2 3 4 5 6 7 8 9      Currently a student      Yes       No

**19. Indicate any language(s) you can speak, read and/or write**

	Good	Fair	Poor
Speak			
Read			
Write			

**20. High School Diploma Yes  No**

Name of High School Attended: \_\_\_\_\_ Mo./Yr. Diploma awarded \_\_\_/\_\_\_

Address of School: \_\_\_\_\_

GED: Name of GED Course/Agency: \_\_\_\_\_ Mo./Yr. Of GED Certificate \_\_\_/\_\_\_

Address of Course/Agency: \_\_\_\_\_

**21. Post-secondary Schools Attended: (Vocational/Technical/College/University)**

Name \_\_\_\_\_ Dates attended: From \_\_\_/\_\_\_ To \_\_\_/\_\_\_

City/State \_\_\_\_\_ Date Graduated \_\_\_/\_\_\_/\_\_\_

Major course of Study \_\_\_\_\_ Degree/Certificate \_\_\_\_\_

**Post-secondary Schools Attended: (Vocational/Technical/College/University) Continued,**

Name \_\_\_\_\_ Dates attended: From \_\_\_/\_\_\_ To \_\_\_/\_\_\_

City/State \_\_\_\_\_ Date Graduated \_\_\_/\_\_\_/\_\_\_

Major course of Study \_\_\_\_\_ Degree/Certificate \_\_\_\_\_

**Post-secondary Schools Attended: (Vocational/Technical/College/University) Continued,**

Name \_\_\_\_\_ Dates attended: From \_\_\_/\_\_\_ To \_\_\_/\_\_\_

City/State \_\_\_\_\_ Date Graduated \_\_\_/\_\_\_/\_\_\_

Major course of Study \_\_\_\_\_ Degree/Certificate \_\_\_\_\_

22. For office/clerical work only	Office equipment and computers used	Years
Typing Yes <input type="checkbox"/> No <input type="checkbox"/> WPM:		
Dictation: Yes <input type="checkbox"/> No <input type="checkbox"/> WPM:		
Software:		

23. For labor/craft work only	Trucks, equipment and machinery used	Years
Drivers license: Yes <input type="checkbox"/> No <input type="checkbox"/> DL#:		
Commercial drivers license: Yes <input type="checkbox"/> No <input type="checkbox"/> Classification:		
List any trade organization memberships:		
Trade/skill:		
List other special skills or training you have acquired that enhances your basic job knowledge:		

Please, list any licenses or certificates you have attained:

24. Licenses/Certificate/Card	Licensing/Certificate Institution	License #	Expiration

**25. Job History**

Starting with the present, list your last few employers. Please be specific on your job duties. If you need more space, use another sheet of paper. Include self-employment and include summer and part-time jobs. You may attach a resume, but complete this application as well. If you have a resume please **DO NOT WRITE** “see resume”, fill in the information listed on the next few pages. (List most recent job first)

**Job History Continued,**

Job Title	Company	Type of Business
Dates worked From:                      To:	Address	City/State/Zip
Wage/salary	Immediate Supervisor's Name	
Duties/responsibilities:		
Type of equipment used/operated:		
Achievements:		
Reason for leaving:		

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Duties/responsibilities:		
Type of equipment used/operated:		
Achievements:		
Reason for leaving:		

**26. Work References**

List three people not related to you who would be able to attest to your skills and job performance. (former employers, supervisors, co-workers or instructors)

Name	Title	Relationship	Address	Phone	Length of time known

The purpose of The Kuskokwim Corporation’s Talent Bank is to assist with finding employment for it’s job seeking shareholders and immediate family members. A shareholder’s immediate family is family members, including non-shareholder spouses living in the same household. The Talent Bank is designed **to provide: 1) employers with information on TKC shareholders and immediate family members that may be available for employment, and 2) to provide job listings to shareholders and immediate family members for positions that become available.** TKC’s Talent Bank will be used only to provide information to employees and to let applicants know of any job openings that TKC is informed of. However, job seeking does not end with submitting a Talent Bank Application. It is the applicant’s responsibility to continue to make their presence known to possible employers. It is also the applicant’s responsibility to provide updated information to TKC as necessary. The Kuskokwim Corporation’s Talent Bank will notify the applicant towards any employment opportunities that have been presented to us, however, it does not guarantee that the shareholder or immediate family members of a shareholder will be hired.

Employment Referral Service Personal Information: The information provided by you is considered confidential and information presented on the application will be given out only to employers. It will be used only by TKC in assisting the applicant in seeking employment. By signing below, you authorize TKC in disseminating the information provided in the Talent Bank application form to potential employers.

I hereby certify that the information on this application is true and complete to the best of my knowledge. I agree that TKC shall not be held liable in any respect if a job offer is not extended, is withdrawn, or my employment is terminated because of false statements, omissions or answers made by me on this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**The Kuskokwim Corporation, 4300 B Street, Suite 207, Anchorage, AK 99503, 1-800-478-2171**