

## 2010 Employment Application

Date: \_\_\_\_\_

### Applicant Information

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_

City State ZIP Code

Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
 Cell: ( ) \_\_\_\_\_ Shirt Size: \_\_\_\_\_

Date Available: \_\_\_\_\_ Last Day Available: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Are there any days or time periods you are unavailable?  YES  NO If yes, when? \_\_\_\_\_

Position interested in: \_\_\_\_\_ Full Time  or Part Time

Are you a citizen of the United States?  YES  NO If no, are you authorized to work in the U.S.?  YES  NO

Have you applied for a position before?  YES  NO If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony?  YES  NO If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ City/State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  YES  NO Degree: \_\_\_\_\_

College: \_\_\_\_\_ City/State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  YES  NO Degree: \_\_\_\_\_

Other: \_\_\_\_\_ City/State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  YES  NO Degree: \_\_\_\_\_

### References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ City/State: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ City/State: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ City/State: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

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Office (907)586-2666 Fax (907)586-3990

e-mail: [dock@gguiding.com](mailto:dock@gguiding.com)

**Previous Employment**

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
 City/State: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
 May we contact your previous supervisor for a reference?  YES  NO

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
 City/State: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
 May we contact your previous supervisor for a reference?  YES  NO

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
 City/State: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
 May we contact your previous supervisor for a reference?  YES  NO

**Certifications and Licenses**

Are you currently certified in First Aid?  YES  NO      Are you currently certified in CPR?  YES  NO  
 Driver's License #, State and Expiration date: \_\_\_\_\_  
 How many years have you held a drivers license? \_\_\_\_\_  
 Any driving violations or accidents in the past 3 years or DUIs in the last 5 years?  YES  NO      *If the answer is yes, please fill out the supplemental application: Driving accidents and violations (located on the GGC website)*  
**A) Do you have a Commercial Drivers License or have held one in the past?**  YES  NO      If yes, what class? \_\_\_\_\_ How many years? \_\_\_\_\_  
**B) Do you have a current Captains License?**  YES  NO      If yes, what tonnage? \_\_\_\_\_ How many years? \_\_\_\_\_  
**C) Have you ever worked in a safety-sensitive position that was subject to drug or alcohol testing?**  YES  NO  
*If the answer is YES to question A, B, or C please fill out the supplemental application: previous employment in a safety sensitive Area (located on the Gastineau Guiding Company Website in the employment section)*  
 Do you speak another language?  YES  NO      If yes, what language(s)? \_\_\_\_\_  
 List any relevant certifications or training for the position you are interested in: \_\_\_\_\_

Why have you chosen to apply at Gastineau Guiding? \_\_\_\_\_  
 How did you hear about Gastineau Guiding? \_\_\_\_\_

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Cover Letter**

*Tell us a bit about yourself and what you would like to get out of a summer with Gastineau Guiding...*