



# Anchorage Water and Wastewater Utility

Municipality of Anchorage

Employment Application

An Equal Opportunity and an Affirmative Action Employer & Complies with Title 1 of ADA



Employee Services Office  
3000 Arctic Blvd., #310  
Anchorage, Alaska 99503  
Phone (907) 786-5501 - Fax (907) 786-5035  
E-mail: HR@awwu.biz

## Information and Instructions

Applications will only be accepted in response to a published Position Announcement during an active recruitment period. Published Position Announcements are available at the Employee Services Office Monday thru Friday from 8:00 a.m. to 4:30 p.m. excluding Municipal holidays. You may also call 786-5501 or visit the AWWU Jobs Website on the Internet at <http://www.awwu.jobs>.

A complete and accurate application must be submitted for each position and received by the Employee Services Office by 4:30 p.m. on the closing date listed on the Position Announcement. All sections of the application must be legible, completely filled out, signed, and dated. Use additional sheets if necessary to ensure all information is provided.

**Criminal Convictions:** A criminal conviction, including non-judicial punishment issued during military service by a military tribunal, military administrative agency, or by a commanding officer, for offenses comparable to violations of federal, state, and local criminal laws, will not always constitute grounds for disqualification. The type and number of charges for which an applicant was convicted, date of the conviction(s), as well as the relationship to the applied for position will be evaluated. However, a criminal conviction for an offense involving moral turpitude within 7 years prior to the application will result in applicant disqualification. Additionally, if you check "yes" and do not give a complete and accurate explanation of your conviction(s), your application will not be considered for the position.

An applicant who receives an unconditional pardon, or receives a Suspended Imposition of Sentence **AND** had the conviction(s) set aside by court order, need not list the conviction **UNLESS** the applicant is applying for a position requiring a background check or is required to register as a sex offender under AS 12.63.

**Background Check:** Some Municipal positions require a background check before an appointment is confirmed.

**Drivers License:** If selected for a position requiring a driver's license, appointment will be conditioned upon submission of a copy of the applicant's Alaska Driver's License and a current copy of his/her Department of Motor Vehicle driving record, including a driving record from previous states if the Alaskan driver's license was first issued within one year prior to application, documenting an acceptable driving history.

**Veterans Preference:** A Veteran is a person who has received an honorable discharge from the Army, Navy, Air Force, Coast Guard, Marine Corps, National Guard, or organized Military reserves of the United States; and who has served during the following time periods: December 7, 1941 to July 1, 1955; or for more than 180 consecutive days, any part of which occurred after January 31, 1955 and before October 15, 1976; or during the Gulf War from August 2, 1990 through January 2, 1992; or in a campaign for which a campaign medal has been authorized, including El Salvador, Grenada, Haiti, Lebanon, Panama, Somalia, Southwest Asia, Bosnia, or the Global War on Terrorism. Medal holders and Gulf War veterans who enlisted after September 7, 1980, or entered on active duty (not active duty for training) on or after October 14, 1982, must have served continuously for 12 months, or for the full period, or ordered to be active duty.

## Affirmative Action Program

The Municipality of Anchorage has an Affirmative Action program. To assist with the MOA program, please provide the following information for reporting purposes only. In accordance with State and Federal Law, this information will be retained separately for record-keeping purposes and will not be made a part of your application.

### Voluntary Information

Name:			Today's Date:
(Last)	(First)	(Middle)	
Job Number:	Birthdate:	Gender:	Are you disabled?
Ethnic Group:		Veteran Status:	
From what source did you hear about this job?			



# Anchorage Water and Wastewater Utility

## Municipality of Anchorage Employment Application



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Position applying for (use title listed on position Announcement)	Job Number	Are currently employed by the Municipality of Anchorage? If yes, list Department/Division:
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Name  (Last) (First) (Middle)	Home Phone	Work Phone
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Residence Address  Street City State Zip Code	Cell Phone	Message Phone
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Mailing Address  Street City State Zip Code	E-mail Address
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**Criminal Convictions** – Have you ever been convicted of any violation of the law, other than minor traffic violations?  
**If yes, list conviction(s), date(s) and sentence(s).** (DUI/DWI's must be listed.) If more space is needed, provide an attachment. **NOTE:** Applicants applying for a position requiring a background check must list any unconditional pardons, suspended imposition of sentences (SIS) or any other conviction set aside by court order.

Conviction	Date	Sentence

Are you at least 18 years of age?	Do you have a legal right to accept employment in the United States?
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Have you ever tested positive or refused to take a DOT drug test for a position for which you were not hired:			
Do you have a current Driver's License? Do you have a current CDL?	If CDL, Indicate Class	List CDL endorsements	List Restrictions

### Education

Do you have a High School Diploma or GED Certificate?

Name of High School Attended:	City/State
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College, University or Graduate Schools (if more space is needed, provide an attachment)

Name and Location of School	Dates Attended	Total Credit Hours		Major/Minor or Subjects Taken	Type of Degree and Year Received*
		Semester	Quarter		
	From: To:				
	From: To:				
	From: To:				

### Technical or Vocational Schools \*AA, AS, BA, BS, MA, MEd, Ph.D. etc.

Name and Location of School	Dates Attended	Total Course Hours	Course Study	Type of Degree Received*	Year Received
	From: To:				
	From: To:				

\*AA, AS, BA, BS etc.

List Current Professional Licenses, Certificates and/or Registrations	Expiration Date:
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Name

Job #

**Employment History (continued)**

Describe **all** work history beginning with your current or most recent position/job. Include volunteer and military experience, including military rank. If necessary, use additional pages or a resume as long as it provides all required information. **Failure to provide complete and accurate information regarding each job held, including providing misleading or false information, may result in disqualification for the position or termination of employment upon discovery.**

Job Title	Name/Title of Supervisor		Supervisor's Phone Number
Employer/Company Name:	Ending Pay \$	Employment Dates (List Month and year)	Reason for Leaving
Address: City, State, Zip:	Hours per week	From: To:	
Duties/Responsibilities			
May we contact your present employer?			

Job Title	Name/Title of Supervisor		Supervisor's Phone Number
Employer/Company Name:	Ending Pay \$	Employment Dates (List Month and year)	Reason for Leaving
Address: City, State, Zip:	Hours per week	From: To:	
Duties/Responsibilities			

Job Title	Name/Title of Supervisor		Supervisor's Phone Number
Employer/Company Name:	Ending Pay \$	Employment Dates (List Month and year)	Reason for Leaving
Address: City, State, Zip:	Hours per week	From: To:	
Duties/Responsibilities			

Name

Job #

**Employment History (continued)**

Describe **all** work history beginning with your current or most recent position/job. Include volunteer and military experience, including military rank. If necessary, use additional 1 pages or a resume as long as it provides all required information. **Failure to provide complete and accurate information regarding each job held, including providing misleading or false information, may result in disqualification for the position or termination of employment upon discovery.**

Job Title	Name/Title of Supervisor		Supervisor's Phone Number
Employer/Company Name:	Ending Pay \$	Employment Dates (List Month and year)	Reason for Leaving
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	Hours per week	From: To:	
Duties/Responsibilities			

List the types of computer software and programs you have used.

List any other special qualifications, skills and/or abilities.

List your typing, data-entry, and 10-key skills.

Typing \_\_\_\_\_ WPM

Data Entry \_\_\_\_\_ KSM

10-Key \_\_\_\_\_ KSM

List relatives employed by the Municipality of Anchorage

Name	Relationship	Department

**APPLICANT AUTHORIZATION AND CERTIFICATION – I AUTHORIZE** the Municipality of Anchorage (MOA) - AWWU to obtain any information relating to the facts provided in this application from schools, employers, criminal justice agencies, individuals, etc. This information may include, but is not limited to, academic, performance, attendance, achievement, personal history, disciplinary, arrest, and conviction records. **I DIRECT** you to release such information to the MOA - AWWU regardless of any agreement I may have made with you previously to the contrary. **I RELEASE** any employer, including individuals such as records custodians, from any and all liability for damages of whatever kind of nature which may at any time result on account of compliance, or any attempts to comply with this authorization.

**I CERTIFY** that the statements contained herein are true to the best of my knowledge. I understand that any incomplete, inaccurate, misleading, false or incorrect information may result in rejection of my application, disqualification from consideration, may render an appointment void and/or can be cause for my dismissal of employment upon discovery.

**I AGREE** to submit to such tests and physical and/or mental examinations as the MOA - AWWU may require.

**For e-mail submissions only:** By submitting this form the applicant certifies that the information contained in the documents is correct and acknowledges that the applicant will be required to sign the form to re-confirm that certification prior to interviewing for any position.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date