



APPLICATION FOR EMPLOYMENT

POSITION APPLYING FOR: _____

An Equal Opportunity Employer

Last Name, First Name Middle Initial	Home Telephone	Cellular Telephone	What is your salary expectation for this position?
Complete Street Address, City, State, Zip Code		Email Address	

<p>Are you or any family member a shareholder of Tanadgusix Corporation (TDX)? Yes No</p> <p>Are any of your relatives employed by BSEn? Yes No</p> <p>Have you ever been employed or interviewed with BSEn? Yes No</p> <p>If yes, list the dates: _____ Position: _____</p> <p>Were you referred by anyone? Yes, referred by: _____ No</p> <p>Type of employment desired: Full-Time Part-Time</p> <p>Would you consider relocation? Yes No</p> <p>Would you consider remote site work? Yes No</p> <p>My driver's license is valid: Yes No I do not have a driver's license</p> <p>Driver's License # _____ State of Issue: _____</p> <p>Have you had any accidents during the past three years? Yes No If yes, how many? _____ accidents</p> <p>Have you had any moving violations during the past three years? Yes No If yes, how many? _____ violations</p>	<p>Are you at least 18 years old? Yes No</p> <p>Are you authorized to work lawfully in the United States? Yes No</p> <p>Do you have a current U.S. Passport? Yes No</p> <p>If no, is there anything that would preclude you from getting one? _____</p> <p>Will you now, or in the future, require BSEn to commence ("sponsor") an immigration case in order to employ you (for example, H-1B or other employment-based immigration case)? This is sometimes called "sponsorship" for an employment-based visa status. Yes No</p> <p>Have you ever held a security clearance by a U.S. Government Agency? Yes No</p> <p>If yes, list type: _____</p> <p>Is it still active? Yes No</p> <p>Date of Clearance: _____</p>	<p style="text-align: center;">*****</p> <p style="text-align: center;">This information is required <u>only</u> if the position you are applying for requires a mandated background check for access to U.S. Government facilities or Department of Defense clearance.</p> <p style="text-align: center;">*****</p> <p>Have you ever been convicted of a felony or misdemeanor? Include any Suspended Imposition of Sentence or DUI/DWI convictions.</p> <p style="text-align: center;">Yes No</p> <p>If yes, please provide year of conviction: _____</p> <p>If you answered "yes" to the above question, be prepared to provide an explanation during an interview, even if you received a suspended imposition of sentence. <i>A conviction will not necessarily bar you from employment with BSEn.</i></p>
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Submit Application and current resume to BSEn Human Resources:

BY MAIL or IN PERSON: 3601 C Street, Suite 1000-31 Anchorage, AK 99503	BY EMAIL: HR@bseak.com	BY FAX: 907-278-2316
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EDUCATION

Type of School	Name and Location of School	Diploma or Degree Types	Highest Grade Completed	Graduated
High School				
College /University				
Graduate School				
Other				

List any certificates you hold that relate to this position. Attach copies of degrees, certificates or any licenses required for this position:

Special courses, training or experience acquired, including military experience:

EMPLOYMENT RECORD: Do not leave any blanks.

With most recent employer first, list employers that document the minimum years of work experience if required for the position. Also, list any period of unemployment, self-employment, seasonal and part-time positions.

If applying for a position which requires a Security Clearance, and you have served in the military, please list all positions, their corresponding dates, duties and note if retired.

Company Name and Address:	Supervisor & Phone #:	May we contact?	Yes	No
Position Held and Dates of Employment (mm/yy to mm/yy):				
Describe Your Job Duties:				
Reason for Leaving:				

Company Name and Address:		Supervisor & Phone #:		
Position Held and Dates of Employment (mm/yy to mm/yy):		May we contact?	Yes	No
Describe Your Job Duties:				
Reason for Leaving:				
Company Name and Address:		Supervisor & Phone #:		
Position Held and Dates of Employment (mm/yy to mm/yy):		May we contact?	Yes	No
Describe Your Job Duties:				
Reason for Leaving:				
Company Name and Address:		Supervisor & Phone #:		
Position Held and Dates of Employment (mm/yy to mm/yy):		May we contact?	Yes	No
Describe Your Job Duties:				
Reason for Leaving:				

EMPLOYMENT RECORD: Continued

Company Name and Address:		Supervisor & Phone #:		
Position Held and Dates of Employment (mm/yy to mm/yy):		May we contact?	Yes	No
Describe Your Job Duties:				
Reason for Leaving:				
Company Name and Address:		Supervisor & Phone #:		
Position Held and Dates of Employment (mm/yy to mm/yy):		May we contact?	Yes	No
Describe Your Job Duties:				
Reason for Leaving:				

Based on the minimum qualifications listed in the job description, please list why you are qualified to perform the tasks required of the position.

Professional References: Please list at least three individuals who can attest to your abilities and work accomplishments, excluding any relatives.

Name	Company/Relationship	Contact Number

BSEn is an Equal Opportunity Employer. All qualified applicants will be considered for all positions without regard to race, color, religion, sex, sexual orientation, gender identity or national origin, disability or protected veteran status.

If you are disabled and need accommodation in the application or interview process, please call BSEn Human Resources at (907) 278-2311 to request such accommodations.

Applicants for positions at BSEn may be required to sign a release and submit to a background check and pre-employment drug screen at a location designated by BSEn. Applicants who test positive for illegal drugs will not be hired. Any offer of employment will be contingent upon successful completion of a background investigation and any other required testing for the position.

Any position requiring advanced education must have the supporting documentation (i.e. college transcripts, diploma or certificate) attached to the application or provided at the time of interview.

CERTIFICATION & AUTHORIZATION

I hereby certify that all statements made in this application, as well as information given throughout the employment process, including pre-employment drug screen, are true and correct to the best of my knowledge and belief. I understand that any misrepresentations or falsification shall be sufficient reason for dismissal from or refusal of employment. _____ **Initials**

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to BSEn and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information. _____ **Initials**

I understand that during employment with the Company, I shall be subject to all the Company’s rules, regulations and policies regarding medical examinations, drug and alcohol screening, and other qualifying tests. _____ **Initials**

I understand that this application does not obligate the company to offer me employment or to hire me. I further understand that if I am employed by the Company, my employment will be on an “at will” basis and my employment could be terminated by the Company at any time without advance notice and without liability. If I am employed I understand that I will wear the prescribed personal protective equipment and will abide by all Federal, State and Company procedures and regulations while working for the Company. _____ **Initials**

I hereby acknowledge that I have read and fully understand the foregoing and seek employment under these conditions. _____ **Initials**

This application will be considered active for only this position. If I wish to be considered for other positions, I must fill out and submit a new application.

Signature _____ Date _____
 (If submitted electronically, your e-mail will replace your signature.)

All information on this application will be treated confidentially. BSEn does not release information about its applicants/employees unless required by law or specifically authorized.

Voluntary EQUAL EMPLOYMENT OPPORTUNITY and VEVRAA Information Request Confidential Human Resource Document

Information provided, or omitted, here will not be considered in the application or hiring process.

BSEn maintains data on the racial/ethnic, gender identity, disability and protected veteran status of all applicants for employment. The data provides BSEn with information necessary to monitor compliance with Equal Employment Opportunity, Vietnam Era Veterans' Readjustment Assistance Act, and section 503 of the Rehabilitation Act requirements.

This contractor and subcontractor shall abide by the requirements of 41 CFR §§ 60-1.4(a), 60-300.5(a) and 60-741.5(a). These regulations prohibit discrimination against qualified individuals based on their status as protected veterans or individuals with disabilities, and prohibit discrimination against all individuals based on their race, color, religion, sex, sexual orientation, gender identity or national origin. Moreover, these regulations require that covered prime contractors and subcontractors take affirmative action to employ and advance in employment individuals without regard to race, color, religion, sex, sexual orientation, gender identity or national origin, protected veteran status or disability.

Position Applied For: _____ Date: _____

Applicant Name: _____ Date of Birth: _____ Gender: Female Male

Check if applicable: TDX Shareholder TDX Family Member Alaska Native

RACIAL / ETHNIC DATA: Check the one with which you identify:

Hispanic or Latino - Persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

White (not Hispanic or Latino) - Persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (not Hispanic or Latino) - Persons having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (not Hispanic or Latino) - Persons having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (not Hispanic or Latino) - Persons having origins in any of the original people of the Far East, Southeast Asia, or the Indian Subcontinent. This area includes, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaskan Native (not Hispanic or Latino) - Persons having origins in any of the original peoples of North America and maintains cultural identification through tribal affiliation or community attachment.

Two or More Races (not Hispanic or Latino) - All persons who identify with more than one of the above five races.

VETERAN STATUS: 1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans. These classifications are defined as follows:

- A "disabled veteran" is one of the following: (a) A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; or (b) A person who was discharged or released from active duty because of a service-connected disability.
- A "recently separated veteran" means any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.
- An "active duty wartime or campaign badge veteran" means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An "Armed forces service medal veteran" means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below. We request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA.

I identify as one or more of the classifications of protected Veteran listed above.

I am not a protected Veteran.

Thank you for taking the time to complete this form