



ALASKA ICEFIELD EXPEDITIONS, INC

PO Box 483 Talkeetna, AK 99676 * 907-495-3121 * www.akdogtour.com

EMPLOYMENT APPLICATION

Yes, you do have to fill out Page 1 even if you did so last year.

PLEASE COMPLETE ALL AREAS and RETURN Your APPLICATION BY MAIL

OR EMAIL TO dogjobs@live.com

ALASKA ICEFIELD EXPEDITIONS, Inc is an equal opportunity employer. Applicants are considered without regard to race, color, religion, sex, national origin, marital or veteran status, or the presence of a non-job related handicap.

Job Title(s) Applying For: _____

Name: _____

Last First Middle

Address: _____

Street City State Zip

Permanent Address: _____

Street City State Zip

Email: _____ Phone: (____) ____ - ____ Date of Birth: ____/____/____

Social Security Number: _____ Driver's License Number _____

1stAid/CPR Card Required Expires _____ WFA _____ ETT _____ EMT _____ Attached..... Yes No
Do you have legal right to accept employment in the US? Yes No
Have you been charged or convicted with a felony or misdemeanor in the last ten years?.....Yes No
If yes, describe conditions (conviction will not necessarily disqualify an applicant for employment):

Will you be able to work to the end of September.....Yes No

If no, what is the last day you will be available for work? _____

Due to the remote nature of the work location and it is necessary for the employer to be aware of medical conditions and allergies.

Do you have any Allergies or Medical Conditions.....Yes No

If so, please describe _____

Uniforms are required please list your..... Jacket Size _____ T Shirt Size _____

EMERGENCY: In case of Emergency Notify –

Name Address Phone No.

If I am a successful applicant:

I understand that I will be living in a remote camp accessible by helicopter only, weather permissible. I accept the inherent risks of a remote location and acknowledge that in case of injury or illness medical treatment may be delayed due to the remote inaccessible location. I agree to accept all risks and hold Alaska Icefield Expeditions Inc. and its affiliates harmless.

I certify that I do not use drugs or abuse alcohol. I acknowledge that drug testing may be implemented at any time, and will willingly comply. Furthermore, I understand that any use of drugs is grounds for immediate dismissal.

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed my employment terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations. I understand and agree that my employment and compensation can be terminated, with or without cause, and with or without notice at any time.

APPLICANT SIGNATURE DATE

You do not have to fill out the following if your resume or previous application is on file.

EDUCATION

Schools/Colleges Attended	# Years	GPA	Year Grad	Degree
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

MILITARY SERVICE Yes No Duty/Specialized Training: _____

EMPLOYMENT/WORK EXPERIENCE: Start with your present or most recent position. Use Additional paper as needed.

Employer: _____

Job Title: _____ Salary: _____ Supervisor: _____

Street Address: _____

City/State/Zip: _____ Phone: (____) ____ - ____

Describe Duties/Responsibilities/Accomplishments:

Reason for Leaving: _____

Dates of Employment (Month/Year) From: _____ To: _____

Employer: _____

Job Title: _____ Salary: _____ Supervisor: _____

Street Address: _____

City/State/Zip: _____ Phone: (____) ____ - ____

Describe Duties/Responsibilities/Accomplishments:

Reason for Leaving: _____

Dates of Employment (Month/Year) From: _____ To: _____

Employer: _____

Job Title: _____ Salary: _____ Supervisor: _____

Street Address: _____

City/State/Zip: _____ Phone: (____) ____ - ____

Describe Duties/Responsibilities/Accomplishments:

Reason for Leaving: _____

Dates of Employment (Month/Year) From: _____ To: _____

PERSONAL REFERENCES

List three personal references who are not relatives or former supervisors:

Name: _____

Address: _____

Phone:(____) ____ - ____ Years Known: _____

Name: _____

Address: _____

Phone:(____) ____ - ____ Years Known: _____

Name: _____

Address: _____

Phone:(____) ____ - ____ Years Known: _____

SPECIAL SKILLS Describe any special skills or qualifications for this work:

I certify all of the above information is correct

Applicant

Date