

**BRISTOL BAY TELEPHONE COOPERATIVE, INC.**  
**Employment Application**

Bristol Bay Telephone Cooperative, Inc. is proud to serve our community with integrity, reliability, and innovation. We seek dedicated professionals who share our commitment to excellence. Please complete this application fully and accurately. We are an equal opportunity employer and consider all applicants without regard to race, color, religion, gender, national origin, age, disability, veteran status, or any other protected classification.

**Employer Information**

Bristol Bay Telephone Cooperative, Inc.  
PO Box 259, King Salmon, Alaska 99613  
Phone: 907-246-3403

**Applicant Information**

Full Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_  
Years at Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_ Driver's License (State/Number): \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

**Position Information**

Position Applied For: \_\_\_\_\_ Full-Time / Part-Time (circle one)  
Desired Salary: \$ \_\_\_\_\_ per \_\_\_\_\_  
Available Start Date: \_\_\_\_\_  
Willing to work nights/weekends? Yes / No  
Willing to work overtime? Yes / No  
Have you ever been convicted of a felony or misdemeanor (excluding sealed/expunged cases)?  
Yes / No  
If yes, please explain: \_\_\_\_\_

## Skills and Qualifications

List any relevant skills, certifications, or technical proficiencies. Indicate years of experience and rate your ability (1 = Basic, 5 = Expert).

Skill: \_\_\_\_\_ Years: \_\_\_\_\_ Level (1–5): \_\_\_\_\_

Skill: \_\_\_\_\_ Years: \_\_\_\_\_ Level (1–5): \_\_\_\_\_

Skill: \_\_\_\_\_ Years: \_\_\_\_\_ Level (1–5): \_\_\_\_\_

## Employment History

List your work experience beginning with your most recent employer. Include military or volunteer experience. Attach additional sheets if needed.

### 1. Employer #1

Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_

Job Title / Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_

### 2. Employer #2

Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_

Job Title / Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_

### 3. Employer #3

Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_

Job Title / Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employment Dates: From \_\_\_\_\_ To \_\_\_\_\_

## Education and Training

High School: \_\_\_\_\_ Graduated? Yes / No

College/University: \_\_\_\_\_ Degree: \_\_\_\_\_

Other Training or Certifications: \_\_\_\_\_

## Additional Information

Please include any volunteer work, community involvement, awards, or additional details relevant to your application.

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## References

Provide two professional or personal (non-relative) references:

### 4. Reference #1

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### 5. Reference #2

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Applicant Certification and Consent

I certify that the information provided in this application is accurate and complete to the best of my knowledge. I understand that any false or misleading statements may disqualify me from employment or result in termination. I authorize Bristol Bay Telephone Cooperative, Inc. to verify my employment history, education, and references.

I understand that completing this application does not guarantee employment and that any offer of employment may be contingent upon background checks or other verification processes.

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