

# Interior Alaska Roofing, Inc.

3790 Schacht Street • Fairbanks, Alaska 99701  
(907) 456-5545 - Phone • (907) 452-2693 - Fax

inakroof@usacom.org www.interiorakroofing.com

## APPLICATION

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

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
(First) (MI) (Last)

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Message Phone: (\_\_\_\_) \_\_\_\_\_

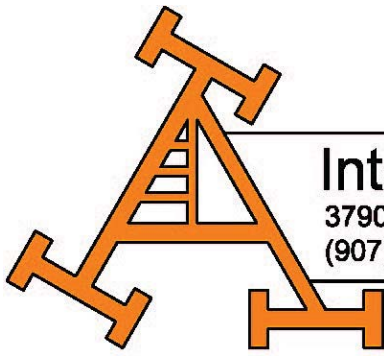
**FORMER EMPLOYERS STARTING WITH MOST RECENT ONE FIRST.  
ALL INFORMATION REQUIRED BELOW MUST BE COMPLETED**

Position Applying For: Laborer \_\_\_\_\_  
Roofer \_\_\_\_\_ (Requires 3 years verification of previous employment)  
Shingler \_\_\_\_\_ (Requires 1 year verification of previous employment)

<u>Date Employed</u>	<u>Name &amp; Address of Employer</u>	<u>Position Held</u>	<u>Reason for Leaving</u>
From _____ To _____	_____ _____ Phone #: _____ Contact: _____	_____	_____
From _____ To _____	_____ _____ Phone #: _____ Contact: _____	_____	_____
From _____ To _____	_____ _____ Phone #: _____ Contact: _____	_____	_____

Types of Roofing Performed (if any): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**INTERIOR ALASKA ROOFING, INC. IS AN EQUAL OPPORTUNITY EMPLOYER**



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## APPLICATION CONTINUED

Answer the following questions with yes or no:

- A. Have you ever been denied a license, permit, or privilege or operate a motor vehicle? \_\_\_\_\_
- B. Has any license, permit, or privilege ever been suspended or revoked? \_\_\_\_\_

IF THE ANSWER TO EITHER "A" OR "B" IS YES, PLEASE GIVE A BRIEF STATEMENT.

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Traffic Convictions, Forfeitures, and DWI's for the Past Three (3) Years (Other than Parking)

<u>LOCATION</u>	<u>DATE</u>	<u>CHARGE</u>	<u>PENALTY</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Current First Aid Card                      Yes \_\_\_\_\_      No \_\_\_\_\_ (If yes, Date Received \_\_\_\_\_)

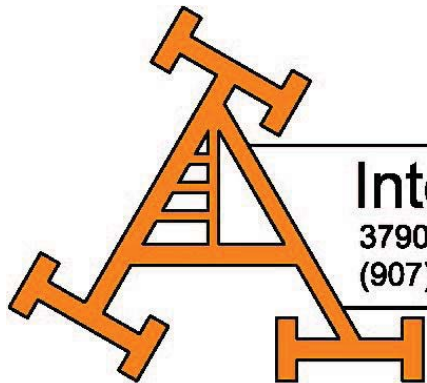
Current Medical Examiners Card        Yes \_\_\_\_\_      No \_\_\_\_\_ (If yes, Date Received \_\_\_\_\_)

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS AS CALLED FOR MAY RESULT IN DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT, IF I AM EMPLOYED, MY EMPLOYMENT IS FOR NO DEFINITE TERM AND MAY BE TERMINATED, WITH OR WITHOUT CAUSE, AT ANY TIME, WITHOUT PREVIOUS NOTICE.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date



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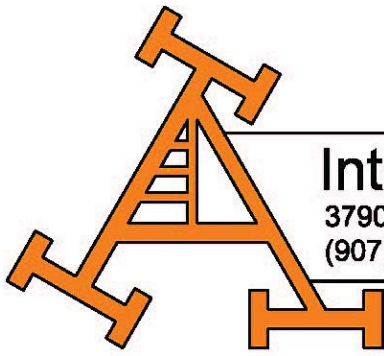
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To Whom It May Concern:

It is the policy of Interior Alaska Roofing, Inc. to assure that applicants and employees are treated without regard to their sex, race, religion, color, or national origin. Such action shall include employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training.

Any person who believes he or she has been discriminated against should contact our Equal Employment Opportunity Officer, Elizabeth Kendall Office Manager, at 3790 Schacht Street, Fairbanks, AK 99701 or at 907-456-5545.

Sincerely,  
Jason Clark, President  
Interior Alaska Roofing, Inc.



**Interior Alaska Roofing, Inc.**

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**THIS FORM IS OPTIONAL**

**Note: You are not required to fill out this form.**

**This Information is for reporting purposes only, and is kept confidential.**

**Male** \_\_\_\_\_

**Female** \_\_\_\_\_

**Caucasian** \_\_\_\_\_

**Black** \_\_\_\_\_

**Hispanic** \_\_\_\_\_

**Asian** \_\_\_\_\_

**Pacific Islander** \_\_\_\_\_

**American Indian** \_\_\_\_\_

**Alaskan Native** \_\_\_\_\_

**Other** \_\_\_\_\_

**OPTIONAL**

**Print Name** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_