



Employer _____	Title or Position _____
Address _____	Phone Number _____
Supervisor _____	Start Date _____ End _____ Ending Salary _____
Reason for leaving _____	
Duties _____	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer _____	Title or Position _____
Address _____	Phone Number _____
Supervisor _____	Start Date _____ End _____ Ending Salary _____
Reason for leaving _____	
Duties _____	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**REFERENCES** Please provide us with three (3) professional references.

1. Name _____	Address _____	Phone No. _____
Title _____	Company _____	
2. Name _____	Address _____	Phone No. _____
Title _____	Company _____	
3. Name _____	Address _____	Phone No. _____
Title _____	Company _____	

I understand this position may be required to submit to pre-employment, random drug, serious incident, and reasonable cause testing.

I acknowledge that employment at CIRI Alaska Tourism Corporation is at will, which means that either I or CIRI Alaska Tourism Corporation can terminate the employment relationship at any time, with or without prior notice.

I further acknowledge that an offer of employment will be contingent upon satisfactory results of an investigation of my past employment, experience, and other questions contained in this application. I voluntarily authorize CIRI Alaska Tourism Corporation and/or its authorized agents to conduct such an investigation. Inquiries may be made about me including but not limited to previous employer verifications, education verifications, consumer credit reports, criminal convictions, motor vehicle reports, social security trace reports and other reports. I understand that CIRI Alaska Tourism Corporation and/or its authorized agents may be requesting information from various Federal, State, and other agencies that maintain records concerning my past activities relating to my driving, credit, criminal or civil cases, and other experiences, and I authorize disclosure of information involving me in the files of insurance companies. In addition, if I am expected to drive, I shall submit a current driver's license along with a copy of my driving record from the appropriate Department of Motor Vehicles prior to employment.

I certify the foregoing is true and accurate to the best of my knowledge. I understand that falsification of any information provided in this employment application is grounds for rejection or immediate dismissal

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**Please submit a brief cover letter with application to:**

CIRI Alaska Tourism Corporation  
 ATTN: Human Resources  
 PO Box 93330 - Anchorage, AK 99509-3330  
 Phone: 907-263-5123 Fax: 907-263-5508 [www.ciri.com](http://www.ciri.com)



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**AUTHORIZATION FOR RELEASE OF INFORMATION**

***I understand that my employment with CIRI Alaska Tourism Corporation is contingent upon satisfactory results of an investigation of my past employment experience, education, credit history, criminal history, driving record, and other activities referred to in this application.***

I, \_\_\_\_\_, voluntarily authorize CIRI Alaska Tourism Corporation and/or its authorized agents to conduct such an investigation. Inquiries may be made about me including but not limited to previous employer verifications, education verifications, consumer credit reports, criminal convictions or history, motor vehicle reports, social security trace reports and other reports. I understand that CIRI Alaska Tourism Corporation and/or its authorized agent(s) may be requesting information from various Federal, State, and other agencies that maintain records concerning my past activities relating to my driving, credit, criminal or civil cases, and other experiences, and I authorize disclosure of information involving me in the files of insurance companies.

I hereby authorize and release, without reservation, any party or agency contracted by CIRI Alaska Tourism Corporation and their employees or assigns from any and all claims, action, suits, agreements, or liabilities arising from the release of said information to CIRI Alaska Tourism Corporation or any authorized agent thereof.

**First Name:** \_\_\_\_\_ **Middle Initial:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Driver's License Number:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Present Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

I have read and understand the above notice.

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

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

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

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