



Anchorage Police Department Auxiliary

**Search Team**, Inc.

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P.O. Box 242883  
Anchorage, AK  
99524-2883  
222-6142

VOLUNTEER APPLICATION PACKET

Thank you for your interest in volunteering with the Anchorage Police Department Auxiliary Search Team (APDST). Attached is a Municipality of Anchorage employment application. Please fill out page 2, only your most recent employment on page 3 & the lower half of page 5, which begins with "List". Provide your email address near your signature and mail it to the address below. After successfully completing a background check you will be invited to an interview with the Executive Board. You will be provided initial training and attend an academy, issued equipment and be subject to a 6 month probation period. If during the selection process, which could take up to 3 months, your circumstances change so you are unable to continue your application, please contact us via the web page.

Return your completed application to APD Auxiliary Search Team Attn: Lt. Dave Parker 4501 Elmore St. Anchorage, Alaska 99507

Thank you.  
Danny Brown  
Director  
APDST  
222-6142



# Municipality of Anchorage Employment Application

An Equal Opportunity and an Affirmative Action Employer

Employment Office  
632 West 6th Avenue, Suite 720  
P.O. Box 196650  
Anchorage, Alaska 99519-6650  
Phone (907) 343-4453 - TTY/TDD (907) 343-4889 - Fax (907) 343-4511

## Information and Instructions

With the exception of applications for Executive positions, applications will only be accepted in response to a published Position Announcement during an active recruitment period. Published Position Announcements are available at the Employment Office Monday thru Friday from 8:00 a.m. to 5:00 p.m. excluding Municipal holidays. You may also call the Job Hotline at 343-4451 or visit the Employment Website on the Internet at [www.ci.anchorage.ak.us](http://www.ci.anchorage.ak.us)

A full, accurate, and complete application must be submitted for each position and received by the Employment Office by 5:00 p.m. on the closing date listed on the Position Announcement. All sections of the application must be legible, completely filled out, signed, and dated. Use additional sheets if necessary to ensure all information is provided. **A resume may be included as an addendum to the Employment History section of the application as long as it provides all the information required in this section.**

**Criminal Convictions:** A criminal conviction, including nonjudicial punishment issued during military service by a military tribunal, military administrative agency, or by a commanding officer, for offenses comparable to violations of federal, state, and local criminal laws, will not always constitute grounds for disqualification. The type and number of charges for which an applicant was convicted, date of the conviction(s), as well as the relationship to the position applied for will be evaluated. However, a criminal conviction for an offense involving moral turpitude within 10 years prior to the application will result in applicant disqualification. Additionally, if you check "yes" and do not give a complete and accurate explanation of your conviction(s), your application will not be considered for the position. An applicant who receives an unconditional pardon, or receives a Suspended Imposition of Sentence **AND** had the conviction(s) set aside by court order, need not list the conviction **UNLESS** the applicant is applying for a position in the Police or Fire Department, for a position requiring a background check, or is required to register as a sex offender under AS 12.63.

**Background Checks:** Some Municipal positions require a background check before an appointment is confirmed.

**Driver's License:** If selected for a position requiring a driver's license, appointment will be conditioned upon submission of a copy of the applicant's Alaska driver's license and a current copy of his/her Department of Motor Vehicle driving record, including a driving record from previous states if the Alaskan driver's license was first issued within one year prior to application, documenting an acceptable driving history.

**Status Postcards** notify you of the status of your application. One will be sent if you include it with your application. Status Postcards are available in the Employment Office.

## Affirmative Action Program

The Municipality of Anchorage has an Affirmative Action Program. To assist us in the program, you are asked to provide the following information for reporting purposes only. In accordance with State and Federal Law, this information will be retained separately for recordkeeping purposes and will not be made a part of your application.

## Voluntary Information

Name  (Last)                      (First)                      (Middle)			Social Security Number	Today's Date
Job Number	Birthdate	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Are you disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Ethnic Group (Check only one) <input type="checkbox"/> (H) Hispanic <input type="checkbox"/> (B) African American <input type="checkbox"/> (W) White <input type="checkbox"/> (A) Asian/Pacific Islander <input type="checkbox"/> (O) Multiracial/Other <input type="checkbox"/> (N) Alaska Native/American Indian			Veteran Status <input type="checkbox"/> (DVT) Disabled (30% or more) <input type="checkbox"/> (VEV) Vietnam-era (at least 6 mos. service between 8/5/64-5/7/75) <input type="checkbox"/> (VET) Veteran	

RECRUITMENT SOURCE - How did you hear about this job opportunity?

<input type="checkbox"/> Website	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Walk-in	<input type="checkbox"/> Union Dispatch
<input type="checkbox"/> Job Hotline	<input type="checkbox"/> Municipal Employee	<input type="checkbox"/> Job Fair	<input type="checkbox"/> Other



# Municipality of Anchorage Employment Application

An Equal Opportunity and an Affirmative Action Employer

Position applying for (Use title listed on Position Announcement)

Job Number

Are you a Municipal Employee  Yes  No  
If yes, list Department/Division

Name

Social Security Number

(Last) (First) (Middle)

Residence Address

Home Phone Number

Street City State Zip Code

Mailing Address

Work Phone Number

Street City State Zip Code

Are you at least 18 years of age?  Yes  No Do you have a legal right to accept employment in the United States?  Yes  No

Criminal Convictions - Have you ever been convicted of any violation of the law, other than minor traffic violations?  Yes  No  
(A DUI/DWI must be listed.) If yes, provide nature of conviction(s), date(s) and sentence(s). If more space is needed, provide an attachment.

Do you have a current Driver's License?  Yes  No If yes, complete the following.

License Number	Expiration Date	State of Issue	If CDL, Indicate level	List CDL endorsements
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## Education

Do you have a High School Diploma or GED Certificate?  Yes  No Date Received

Name of High School Attended City/State

College, University or Graduate Schools (If more space is needed, provide an attachment)

Name and Location of School	Dates attended	Total Credit Hours		Major/Minor or Subjects Taken	Degree and Year Received
		Semester	Quarter		
	From: To:				
	From: To:				
	From: To:				

Technical or Vocational Schools

Name and Location of School	Dates attended	Total Course Hours	Course Study	Degree Received	Year Received
	From: To:				
	From: To:				

List Current Professional Licenses, Certificates and/or Registrations

Date Obtained:

<b>Employment History</b>
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Describe all work history beginning with your current or most recent job. Include volunteer and military experience, including military rank. If necessary, use additional pages or a resume as long as it provides all required information. **Failure to provide complete and accurate information regarding each job held, including providing misleading or false information, may result in disqualification for the position or termination upon discovery.**

Official Job Title	Name/Title of Supervisor		Supervisor's Phone Number
Company Name and City/State of Employer	Ending Pay	Employment Dates (List month and year)	Reason for Leaving
	Hours per week		
Duties/Responsibilities			
May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Official Job Title	Name/Title of Supervisor		Supervisor's Phone Number
Company Name and City/State of Employer	Ending Pay	Employment Dates (List month and year)	Reason for Leaving
	Hours per week		
Duties/Responsibilities			

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	Hours per week		
Duties/Responsibilities			

**Employment History (continued)**

Describe all work history beginning with your current or most recent job. Include volunteer and military experience, including military rank. If necessary, use additional pages or a resume as long as it provides all required information. **Failure to provide complete and accurate information regarding each job held, including providing misleading or false information, may result in disqualification for the position or termination upon discovery.**

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**Employment History (continued)**

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	Hours per week	From: To:	
Duties/Responsibilities			

List the types of computer software and programs you have used.

List any other special qualifications, skills and/or abilities.

**List relatives employed by the Municipality of Anchorage**

Name	Relationship	Department
Name	Relationship	Department

**APPLICANT AUTHORIZATION AND CERTIFICATION - I AUTHORIZE** the Municipality of Anchorage (MOA) to obtain any information relating to the facts provided in this application from schools, employers, criminal justice agencies, individuals, ETC. This information may include, but is not limited to, academic, performance, attendance, achievement, personal history, disciplinary, arrest, and conviction records. I **DIRECT** you to release such information to the MOA regardless of any agreement I may have made with you previously to the contrary. I **RELEASE** any employer, including individuals such as records custodians, from any and all liability for damages of whatever kind or nature which may at any time result on account of compliance, or any attempts to comply with this authorization.

I **CERTIFY** that the statements contained herein are true to the best of my knowledge. I understand that any incomplete, inaccurate, misleading, false or incorrect information may result in rejection of my application, disqualification from consideration, may render an appointment void and/or can be cause for my dismissal upon discovery.

I **AGREE** to submit to such tests and physical and/or mental examinations as the MOA may require.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date