Police Standards C	Council	Michael Edward Craig
	General Inform	ation
Board/Commission and Police Standards Counc		
Additiona None	l Boards/Commissions of interest:	
State Boards/Commissie Alaska Police Standards	ons on which you have served: s Council	
First Name Michael	Middle Name Edward	Last Name Craig
Conflict of Interest		
		10 is required for certain boards and equired for the board or commission which
material conflicts of inter decisions to be made by	rest. Is it possible that you or any m	S 39.52.110) prohibits substantial and nember of your family will benefit financially by n you are applying? If you answer 'yes' to this
Please explain the poter	ntial financial benefit	
	Employment Hi	istory
Alyeska Pipeline Service Concerns Coordinator 2	006 - present	ry. Ianager 1997 - 2006 and Sr. Employee ty Officer, Sergeant, Lieutenant, and Captain
Ec	lucation, Training, Experien	nce & Qualifications
Multiple training courses unconscious bias, emoti incident command syste		ent, interviewing, conflict resolution, t assessments, speed of trust, report writing, t, firearms instruction, corporate security,
qualifying criteria: ASIS International Profe	enses, certifications, or registrations essional Certified Investigator Janua Employee Concerns Professionals	
List any community service, municipal government, and state positions held, and any awards received. Anchorage Sports Officials Association Member at Large American Society for Industrial Security (ASIS) Secretary and Vice-Chair Parkside Homeowners Association Vice President		
Conviction Record		

Have you ever been convicted of a misdemeanor within the past five years or a felony within the past ten years?

No

**Conviction Circumstances** 

## **Certification of Accuracy & Completeness**

By submitting this online application, I swear the information I have entered on this form is true to the best of my knowledge. I understand that if I deliberately conceal or enter false information on the form my application may be rejected, I may be removed from the list of eligible candidates, or I may be removed from the position. I agree that the Office of the Governor may contact present or former employees or other persons who know me to obtain an additional information about my skills and abilities. I understand that the information on this application is public information and may be released through a legal request for such information.

Type "I certify" "I certify"

Resume Addendum:

## **Press Release Wording**

Submitted: 9/27/2021 8:50:06 AM