

STATE OF ALASKA OFFICE OF THE GOVERNOR P.O. Box 110001, Juneau, AK 99811-0001 Phone: (907) 465-3500 Fax: (907) 465-3532

## BOARDS AND COMMISSIONS APPLICATION FORM

## INSTRUCTIONS

A separate application is required for each position for which you apply. Complete and specific answers will aid in rapid and accurate processing of your resume. Please type or print legibly in ink. Forward to the above address. Be sure your answers are true. A willfully false answer may result in your disquelification or removal from office if you are appointed.

73ibame Commette Board or Commission and scat for which I am applying: \_ Please list any other State Boards or Commissions on which you currently or previously have served: Business Telephone: Home or Message Telephone: north AS 39-05-100 requires that a person appointed to a state board or commission be a registered voter prior to the last general election: Are you a registered voter; YES \_\_\_\_\_NO \_\_\_\_\_\_ Voter Registration Number (Optional): \_\_\_\_ Social Security Number (Optional, required if appointed for traval, raimburgement atc.): Have you ever been convicted of a misdemeanor within the past five years or a felony within the past ten years? 💢 if "YES", explain the circumstances on a separate sheet of paper and attach it to this application. A conviction is not necessarily grounds for disqualification. The number of convictions, nature, recentness, and relationship to the board position applied for, will be evaluated and a determination will be made after a review of all relevant facts. CONFLICTS OF INTEREST: Certain boards and commissions require full disclosure of personal financial data under AS 39.50.010. If required for the board or commission for which you are applying, are you willing to do so? \_\_ NO \_ Could you or any member of your family be affected financially by decisions to be made by the board or commission for which you have applied? YES \_\_\_\_\_ NO \_\_\_ If "YES", explain:

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TRAINING AND EXPERIENCE: (If resume attached, it is not necessary to complete items A-D)

A. List any professional licenses, certifications, or registrations and dates obtained that may be used as qualifying criteria:	
(International Bowhenter's Education Program certified - 21997 to pros	rul,
E. List both formal and Informal education and training experiences: (Use additional paper if necessary).  B. S. B. alegical Sciences Biola College 1977  MA Intercultural Studies Biola University 1985	
C. List any community service, municipal government, and state positions held, and any awards received. Include both compensated and uncompensated positions (such as president of a service organization or a mayor). Include length of time serviced.  The structure of Planning Team Member 1997 to present Board number - Haska Traffers Association 1998-99 (?)  Board of Trusters - Bethal Charlet, FAI, AK 2003 2004	
D. Employment work history - paid, unpaid or voluntary. (Use additional paper of necessary).  North Pole Branch, Fourbanks Public Library - Page - Oct 04 - pr.  Fourth Form Manager - May B2 - prajant  US Fish & Wildlife Service - Kannti Newl - Biological Techn  Tuly 85 - Jan 93	esco
The Office of the Governor and the State of Alaska have an Affirmative Action Equal Employment Opportunity Program. To assist in the program, you are asked to voluntarily answer the following questions to provide the information necessary for reporting purposes. Under State and Federal law, the information you provide will no be used to illegally discriminate against you.  DATE OF BIRTH:  SEX: FEMALE	
ETHNICITY: Alaska Native American Indian Asian or Pacific Islander Black Hispanic White	
MULTARY SERVICE (if applicable, give dates):	
CERTIFICATION: 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 may be removed from the contract present or former employees or other persons who know me to obtain an additional	

of the Governor may contact present or former employees of that the information on this application is public 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.

Signature (in ink): 8 School 72 Date: 8-17-05
Please attach a current resume with your application.

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