Workers' Compensation Appeals Commission Stephen Hagedorn General Information Board/Commission and seat you are seeking: Workers' Compensation Appeals Commission, Workers' Compensation Appeals Commission Additional Boards/Commissions of interest: None State Boards/Commissions on which you have served: Workers' Compensation Board 1991 to 2008, Alaska Workers' Compensation Appeal Commission 2008 to 2021 First Name Middle Name Last Name Stephen Hagedorn Conflict of Interest Full disclosure of personal financial data under AS 39.50.010 is required for certain boards and commissions. Are you willing to provide this information if required for the board or commission which you are applying? Yes Service in a public office is a public trust. The Ethics Act (AS 39.52.110) prohibits substantial and material conflicts of interest. Is it possible that you or any member of your family will benefit financially by decisions to be made by the board or commission for which you are applying? If you answer 'yes' to this question you MUST explain the potential financial benefit. Please explain the potential financial benefit **Employment History** Employment work history including paid, unpaid, or voluntary. Alaska Railroad Corporation 1975 to 2009. Position held for last 24 years was Risk Manager. Education, Training, Experience & Qualifications List both formal and informal education and training experiences: I graduated from the University of Northern Iowa with a BA Degree in History List any professional licenses, certifications, or registrations and dates obtained that may be used as qualifying criteria: I have no professional licenses or certifications. List any community service, municipal government, and state positions held, and any awards received. Workers' Compensation Board 1991 to 2008, Alaska Workers Compensation Appeals Commission, 2008 to the present. 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:

I am unsure how to attach my resume utilizing my ipad. If you require it, I can print a hard copy of it and mail it to you. With the exception of my additional 5 years experience on the Alaska Workers' Compensation Appeals Commission, my resume has not changed from my last appointment in 2017.

Press Release Wording

Submitted: 9/22/2021 3:11:12 AM