

CONFIRMATION

HEARING:

ATHLETIC

COMMISSION,

STANLEY

ANDERSON



STATE OF ALASKA  
OFFICE OF THE GOVERNOR  
Pouch A  
Juneau, Alaska 99811

RECEIVED

FEB - 6

GOVERNOR'S OFFICE

BOARDS AND COMMISSIONS RESUMÉ

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 resumé. The initial determination of whether you qualify for the position specified will be based on this application.

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 disqualification or removal from office if you are appointed.

Position for which I am applying:

Athletic Commission

Please list any other Board or Commission on which you serve:

|   |  |                                   |
|---|--|-----------------------------------|
| Name<br>STAN ANDERSEN                     |  | Previous Name applied under       |
| Mailing Address<br>Box 321                |  | Residence Address<br>4th Division |
| City, State and Zip Code<br>Nome AK 99762 |  |                                   |
| Home Telephone<br>443-5728                |  | Business or Message Telephone     |

REPORT ADDRESS AND TELEPHONE CHANGES PROMPTLY

AS 39.05.100 requires that a person appointed to a board or commission be a registered voter before the last general election:

Are you a registered voter?  YES  NO

Voter Registration Number (Optional)

Social Security Number (Optional)

Have you ever been convicted of a misdemeanor within the past five years or a felony within the past ten years?  YES  NO

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, recency and relationship to the board position applied for will be evaluated and a determination will be made after a review of all relevant facts.

A policy in the Governor's Office pertaining to boards and commissions is that a member attend at least 75% of the meetings. Are there any circumstances in either your professional or personal life which would prevent you from participating at the required authorized meetings?  YES  NO

If "YES", explain on a separate sheet of paper and attach to this application.

This position may require that the member travel to either urban or rural (or both) areas. Are there any circumstances which would prevent you from participating?  
NO

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?  YES  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.

The Office of the Governor will not discriminate against an applicant for a Board or Commission based on Sex, Age, National Origin, Marital Status, Pregnancy, Handicap, Religion or Parenthood.

TRAINING & EXPERIENCE: (If resumé 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:

B. List both formal and informal education and training experiences: (Use additional paper if necessary)

14 yrs Schooling

C. List any community service positions, municipal government positions, state positions held, and list any awards received. These include both compensated and uncompensated positions (for example, president of a service organization or a mayor). Also include length of time served in the positions.

member Nome City Council 6 yrs  
" Nome Utility Board 2 yrs & serving  
" PAST Nome Community Center  
ALASKA ~~COASTAL~~ COASTAL POLICY COUNCIL 3 yrs

D. Employment work history: paid, unpaid or voluntary: (Use additional paper if necessary)

Dept of Revenue Office mgr Nome  
SELF Employed Plumber

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 not be used to illegally discriminate against you.

SEX  Male  Female  
ETHNIC BACKGROUND  White  Black  Hispanic  Alaska Native  Asian or Pacific Islander  American Indian

Date of Birth

6-9-46

Military Service (if applicable, give dates)

4-67 to 1-70

CERTIFICATION: I swear that 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 employers or other persons who know me to obtain 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.

Signature In Ink

Stew Anderson

Date

1-30-86