

Please return completed applications to Leslie Ladegard at lladegard@nsedc.com;
907-274-2249 by fax; or by mail to NSEDC, 2701 Gambell St., Suite 400, Anchorage, AK 99503.



Application for consideration by NSEDC's industry partners

This is not an NSEDC employment application and NSEDC's industry partners may require that an applicant complete a separate application. NSEDC's partners are solely responsible for employment decisions. NSEDC will use this application to maintain a database of individuals interested in employment on NSEDC's partners' vessels and operations.

Name: _____ Date of Application: _____
First - M.I. - Last Month - Day - Year

Address: _____
City State Zip

Primary phone #		Type:
Secondary phone #:		Type:
Email address:		
Are you 18 years old or older?		
Are you a Norton Sound resident?		
Have you applied to work w/ NSEDC or one of its partners in the past?	Date of last application:	
Have you worked with NSEDC or one of its partners in the past?	Dates of employment/position:	
When would you be available for work?		

Do you have a specific fishery type that are you interested in? Check all that apply:

Not all selections may be available, but NSEDC will attempt to connect suitable, interested candidates with appropriate partners.

Fishery Type	✓	Any additional specifics
Crab fishing (pot gear)	<input type="checkbox"/>	
Pacific cod/halibut/sablefish (longline gear)	<input type="checkbox"/>	
Pollock/flatfish (trawl gear)	<input type="checkbox"/>	
Other (please describe)	<input type="checkbox"/>	

Education history:

Education	School name/location	Graduated	Major or studies	Diploma/Degree
High school		Y / N Year:		Y / N Year:
College /other		Y / N Year:		Y / N Year:
College /other		Y / N Year:		Y / N Year:

Additional sheets may be attached to present a resume and/or additional work, fishing or educational experience. For more information, please contact Leslie Ladegard at 800-650-2248 or lladegard@nsedc.com.

Fishing / Vessel Work Experience:

	Type of fishing or nature of vessel work, and location of fishing/work	Dates or # of seasons	Size/type of vessel	Specific job or role on vessel
1				
2				
3				

Please list any other information, certifications or experience applicable to work on a fishing and/or processing vessel:

Other work history:

Employer:		Job title:	
Dates of employment:	<i>From:</i>	<i>To:</i>	
Reason for leaving job:			
Supervisor name/title:			
Contact number:		May we contact this employer?	

References:

Please list three references who are not immediate family members whom we could contact.

<i>Name</i>	<i>Contact Number</i>
1.	
2.	
3.	

Authorization:

By signing below, I certify that the above information is true to the best of my knowledge. I authorize NSEDC to share this information with its harvesting and other industry partners for the purpose of potential employment. I understand that this information is not an application for hire but may be used to select candidates for a partner's application process.

Name

Date

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