

Phone: (907) 261-0300

(907) 261-8896

E-mail: CHF-NSC@chugach.com

Please mail, fax, or hand-deliver your completed application by <u>June 3rd, 2022</u>. Priority will be given to complete applications received by the deadline. Applications received after the deadline will be considered on a case-by-case basis.

a case by case basis	<b>'.</b>											
<b>Eligibility Requi</b>	rements											
Have you complete	ed the Descendant Regist	ration wi	th CAC Share	holder Service	s?	Yes or No						
<ul><li>Chugach Al</li><li>Chugach Al</li><li>Chugach Al</li></ul>	atus (Please Select the aska Corporation Shareho aska Corporation Descen- aska Corporation Spouse er of another Alaska Nativ	older dant of a Shar	eholder	on Below)								
Other:												
Applicant's Full Name Email Primary Phone												
Mailing Address			City		State	Zip Code						
Shirt Size	Have you attended cam Yes or No	ip in prev	vious years?	Would you li or emailed?	ke your tra	avel itinerary mailed						
Emergency Cont	act Information											
ľ	Name		Phone Numb	er	Relationship							
Travel Information	<u>on</u>											
Depa	arting from		Retu	urning to		Weight						



#### **Sessions**

<u>565510115</u>
Please select the session that you wish to attend. Session availability varies depending on capacity and travel logistics. Session 1: July 9th - 16th, 2022 and Session 2: July 16th - July 23rd, 2022.
☐ Session 1 – Only
□ Session 2 – Only
☐ Both Sessions – No preference
☐ Both – Session 1 preference
☐ Both – Session 2 preference
☐ Only one session — No preference
Please Select Areas That You Are Interested in Volunteering For:
☐ General Sanitation (Wiping counters, doorknobs, areas of high traffic)
☐ Gathering Firewood
☐ Subsistence (Processing, Cleaning,)
□ Kitchen
□ Bathrooms
☐ Mess hall
□ Steam bath
□ Evening Activities
☐ Teacher Assistant
☐ Teaching the following class:
Please Select At Least Two Time Slots that you would like to Volunteer For:
□ 9:00am − 11:00am
□ 1:00pm − 3:00pm
□ 3:00pm − 5:00pm
□ 7:00pm − 9:00pm
Please Provide Any Relevant Skills or Experience That You May Have:



### **Photo Release & Authorization**

Signature:	Date:
may be excluded from travel to NSC. Youth, volunteers	s disease on the date of travel to Nuuciq Spirit Camp (NSC), employees, or visitors with a contagious disease while at es. A contagious disease, as defined by Alaska Statute Sec. mitted from individual to individual.
	ical evaluation by the camp health care provider and/or medical attention be required, other than that provided by penses.
I understand that reasonable measures will be	
following items are prohibited: firearms, explosives, fir age of 21. Nuuciq Spirit Camp is a drug and alcohol-freThe health history I provided is true and accura	subject to search at any given time. I understand that the eworks, alcohol, drugs, and tobacco products if under the environment, with a zero-tolerance policy. te to the best of my knowledge, and the person hereined camp activities including special trips, except as noted
information for a criminal background check, and that satisfactory criminal conviction record as determined be	by CHF.
I understand that my service to Nuuciq Spirit Ca Foundation and Chugach Alaska Corporation, its officer arising from my voluntary service.	mp is voluntary. I release liability from Chugach Heritage rs, employees, or other volunteers from any situations
and any of CAC's subsidiary companies, of any and all p I have taken during work hours, on company property Photos may be used in the company newsletter, intran	
Images of Chugach Alaska Corporation (CAC) and Chug known as "Chugach") help us visually convey the Chuga Photos and videos of our shareholders, and shareholde	ach brand in our internal and external material.



#### **General Medical History**

### **Confidential (Authorized Personnel Only)**

Participant's Full Name:	
Operations/Serious Injuries:	Date:
Limitations and Special Requirements: i.e. dietary needs, all	ergies, restrictive activity, physical or other
limitations, etc., (be specific):	
<b>Medications:</b> List medication's name, dosage, and directions (Note: all medication must be in original container and presc be turned into the camp health care provider upon arrival for	ribed by a licensed physician, which will need to
Other Health Concerns:	





### PRINT CHARACTERS LIKE THIS **ABCDE 98765**

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#### Consent to Request Consumer Report & Investigative Consumer Report Information

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App	lican	t's Fi	rst N	lame	or I	Initia	l		Last	Nam	ne																					
NY I alsemp I unback accorect throughtout obta	I understand that Chugach Alaska Corporation, Inc ("COMPANY") will use <b>Sterling Infosystems Inc.</b> , <b>1 State Street, New York, NY 10004</b> , <b>(877) 424-2457</b> to obtain a consumer report and/or investigative consumer report ("Report") for employment purposes. I also understand that if hired, to the extent permitted by law, COMPANY may obtain further Reports throughout my employment for an employment purpose from Sterling.  I understand <b>Sterling Infosystems Inc.'s</b> ("STERLING") investigation may include obtaining information regarding my credit background, bankruptcies, lawsuits, judgments, paid tax liens, unlawful detainer actions, failure to pay spousal or child support, accounts placed for collection, character, general reputation, personal characteristics and standard of living, driving record and criminal record, subject to any limitations imposed by applicable federal and state law. I understand such information may be obtained through direct or indirect contact with former employers, schools, financial institutions, landlords and public agencies or other persons who may have such knowledge. If an investigative consumer report is being requested, I understand such information may be obtained through any means, including but not limited to personal interviews with my acquaintances and/or associates or with others whom I am acquainted.																															
The nature and scope of the investigation sought is indicated by the selected services below: (Employer Use Only)																																
☐ Criminal Background Check ☐ Education Verification																																
	SSN Trace/Address Locator											☐ OFAC/Terrorist Watch List																				
	Motor Vehicle Report ☐ Personal Reference Verification											on	☐ Fraud & Abuse Control Info System (FACIS®)																			
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	California, Colorado, Connecticut, Maryland, Oregon, Vermont and Washington State Applicants Only (AS APPLICABLE): I further understand that COMPANY will not obtain information about my credit history, credit worthiness, credit standing, or credit capacity unless: (i) the information is required by law; (ii) I am seeking employment with a financial institution (California, Colorado, Connecticut and Vermont only – in California the financial institution must be subject to Sections 6801-6809 of the U.S. Code and in Vermont it must be a financial institution as defined in 8 V.S.A.§ 11101(32) or a credit union as defined in 8 V.S.A.§													n abo ii) I nanc	out n am ial in	ny cred seekin stitutio	dit k ig e on r	nisto emp nus	ory, o loym t be	cre nen sul	dit t w bje	wo ith	rthir a f o S	ness inan ectio	, c icia ins	redi al in 680	it s nsti 101-	tand tutio -680	ing, (Ca n (Ca 9 of	or o alifo the	credi ornia U.S	it 1, 5.

30101(5)); (iii) I am seeking employment with a financial institution that accepts deposits that are insured by a federal agency, or an affiliate or subsidiary of the financial institution or a credit union share guaranty corporation that is approved by the Maryland

Commissioner of Financial Regulation or an entity or an affiliate of the entity that is registered as an investment advisor with the United States Securities and Exchange Commission (Maryland only); (iv) I am seeking employment in a position which involves access to confidential financial information (Vermont only); (v) I am seeking employment in a position which requires a financial fiduciary responsibility to the employer or a client of the employer, including the authority to issue payments, collect debts, transfer money, or enter into contracts (Vermont only); (vi) COMPANY can demonstrate that the information is a valid and reliable predictor of employee performance in the specific position being sought or held; (vii) I am seeking employment in a position that involves access to an employer's payroll information (Vermont only); (viii) the information is substantially job related, and the bona fide reasons for using the information are disclosed to me in writing, (complete the question below) (Colorado, Connecticut, Maryland, Oregon and Washington only); (ix) I am seeking employment as a covered law enforcement officer, emergency medical personnel, firefighter police officer, peace officer or other law enforcement position (California, Oregon and Vermont only - in Oregon the police or peace officer position must be sought with a federally insured bank or credit union and in Vermont the law enforcement officer position must be as defined in 20 V.S.A. § 2358, the emergency medical personnel must be as defined in 24 V.S.A. § 2651(6), and the firefighter position must be as defined in 20 V.S.A. § 3151(3)); (x) the COMPANY reasonably believes I have engaged in specific activity that constitutes a violation of law related to my employment (Connecticut only); (xi) I am seeking a position with the state Department of Justice (California only); (xii) I am seeking a position as an exempt managerial employee (California only); and/or (xiii)) I am seeking employment in a position (other than regular solicitation of credit card applications at a retail establishment) that involves regular access to all of the following personal information of any one person: bank or credit card account information, social security number, and date of birth,, I am seeking employment in a position that requires me to be a named signatory on the employer's bank or credit card or otherwise authorized to enter into financial contracts on behalf of the employer, I am seeking employment in a position that involves access to confidential or proprietary information of the Company or regular access to \$10,000 or more in cash (California only).

Bona fide reasons why COMPANY considers credit information substantially job related (complete if this is the sole basis for obtaining credit information) or in California and Vermont the COMPANY'S basis for the credit check.

**NY Applicants Only:** I also acknowledge that I have received the attached copy of Article 23A of New York's Correction Law. I further understand that I may request a copy of any investigative consumer report by contacting STERLING. I further understand that I will be advised if any further checks are requested and provided the name and address of the consumer reporting agency.

California Applicants and Residents: If I am applying for employment in California or reside in California, I understand I have the right to visually inspect the files concerning me maintained by an investigative consumer reporting agency during normal business hours and upon reasonable notice. The inspection can be done in person, and, if I appear in person and furnish proper identification; I am entitled to a copy of the file for a fee not to exceed the actual costs of duplication. I am entitled to be accompanied by one person of my choosing, who shall furnish reasonable identification. The inspection can also be done via certified mail if I make a written request, with proper identification, for copies to be sent to a specified addressee. I can also request a summary of the information to be provided by telephone if I make a written request, with proper identification for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or directly charged to me. I further understand that the investigative consumer reporting agency shall provide trained personnel to explain to me any of the information furnished to me; I shall receive from the investigative consumer reporting agency a written explanation of any coded information contained in files maintained on me. "Proper identification" as used in this paragraph means information generally deemed sufficient to identify a person, including documents such as a valid driver's license, social security account number, military identification card and credit cards. I understand that I can access the following website <a href="http://sterlinginfosystems.com/privacy">http://sterlinginfosystems.com/privacy</a> to view STERLING'S privacy practices, including information with respect to STERLING'S preparation and processing of investigative consumer reports and guidance as to whether my personal information will be sent outside the United States or its territories.

Washington State applicants or employees only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Signature: Today's Date:

www.sterlinginfosystems.com Page 2 of 5

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**Signature** 

Today's Date (MMDDYYYY)

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

#### A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment or to take another adverse action against you must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
- a person has taken adverse action against you because of information in your credit report;
- you are the victim of identify theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a> for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a> for an explanation of dispute procedures.
- Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a>.
- You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

• Identity theft victims and active duty military personnel have additional rights. For more information, visit <a href="https://www.consumerfinance.gov/learnmore">www.consumerfinance.gov/learnmore</a>

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of	a. Consumer Financial Protection Bureau
over \$10 billion and their affiliates.	1700 G Street NW Washington, DC 20552
b. Such affiliates that are not banks, savings associations, or credit	b. Federal Trade Commission: Consumer Response Center – FCRA
unions also should list, in addition to the CFPB:	Washington, DC 20580
	(877) 382-4357
2. To the extent not included in item 1 above:	
a. National banks, federal savings associations, and federal branches	a. Office of the Comptroller of the Currency
and federal agencies of foreign banks	Customer Assistance Group
	1301 McKinney Street, Suite 3450 Houston, TX 77010-9050
h Ctata mambar banka branchas and aganaics of faraign banks (athor	b. Federal Reserve Consumer Help Center
b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches	P.O. Box 1200 Minneapolis, MN 55480
of Foreign Banks), commercial lending companies owned or controlled	P.O. Box 1200 Minneapolis, Min 55460
by foreign banks, and organizations operating under section 25 or 25A	
of the Federal Reserve Act	
c. Nonmember Insured Banks, Insured State Branches of Foreign	c. FDIC Consumer Response Center
Banks, and insured state savings associations	1100 Walnut Street, Box #11
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d. Federal Credit Unions	d. National Credit Union Administration
	Office of Consumer Protection (OCP)
	Division of Consumer Compliance and Outreach (DCCO)
	1775 Duke Street
	Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings
	Aviation Consumer Protection Division Department of Transportation
	1200 New Jersey Avenue, SE Washington, DC 20590
Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board
	Department of Transportation 395 E Street S.W. Washington, DC
	20423
5. Creditors Subject to Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access
	United States Small Business Administration 409 Third Street, SW, 8th
7. Brokers and Dealers	Floor Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F St NE Washington, DC 20549
Federal Land Banks, Federal Land Bank Associations, Federal	Farm Credit Administration 1501 Farm Credit Drive McLean, VA
Intermediate Credit Banks, and Production Credit Associations	22102-5090
Farm Credit Administration 1501 Farm Credit Drive McLean, VA	22102 0000
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Retailers, Finance Companies, and All Other Creditors Not Listed	FTC Regional Office for region in which the creditor operates or
Above	Federal Trade Commission: Consumer Response Center – FCRA
	Washington, DC 20580 (877) 382-4357

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