



TULE RIVER TRIBAL COUNCIL

TULE RIVER INDIAN RESERVATION

HR USE ONLY

Accept
 Decline
 ___ Education ___ Experience
 ___ Other

EMPLOYMENT APPLICATION

Please Print

Date: _____

Name:

(Last, First, MI)

Address:

(Number & Street, City, State, Zip)

Telephone:

Home:

Work:

Cell/Pager:

Email: _____

Employment Desired

Position applying for: _____

Department: _____

Salary desired: _____

Are you available for work on weekends?

Yes No

Would you be available for overtime, if necessary?

Yes No

If hired, on what day can you start work?

/ /

Education and Training

School	Name and Address	No. of years Completed	Did you Graduate?	Degree Or Diploma
High School	Name		<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Address			
	City State Zip			
College/ University	Name		<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Address			
	City State Zip			
Vocational/ Business	Name		<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Address			
	City State Zip			
Other	Name		<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Address			
	City State Zip			

<p>Our organization relies heavily on the use of computers. Regardless of the type of position for which you are applying, please indicate your level of competence by checking the appropriate box.</p>		Expert	Competent	Some Experience	No Experience	Application Used
	Word Processing					
	Spreadsheet					
	Database					
	Email					
	Internet/Web Graphics					

Employment History

List below all present and past employment starting with your most recent employer. Account for all periods of unemployment. You must complete this section even if attaching a resume.

<i>Name of Employer</i>	<i>Dates of Employment:</i> _____ From To
<i>Type of Business</i>	<i>Your Supervisor's Name</i>
<i>Street Address</i>	<i>Telephone No.</i>
<i>City</i> _____ <i>State</i> _____ <i>Zip</i> _____	<i>Monthly Pay:</i> _____ Starting Ending
<i>Your Position and Duties:</i> _____	<i>Your Reason for Leaving:</i> _____
_____	_____
_____	<i>May we contact this employer for a reference?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No

<i>Name of Employer</i>	<i>Dates of Employment:</i> _____ From To
<i>Type of Business</i>	<i>Your Supervisor's Name</i>
<i>Street Address</i>	() - <i>Telephone No.</i>
<i>City</i> _____ <i>State</i> _____ <i>Zip</i> _____	<i>Monthly Pay:</i> _____ Starting Ending
<i>Your Position and Duties:</i> _____	<i>Your Reason for Leaving:</i> _____
_____	_____
_____	<i>May we contact this employer for a reference?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No

<i>Name of Employer</i>	<i>Dates of Employment:</i> _____ From To
<i>Type of Business</i>	<i>Your Supervisor's Name</i>
<i>Street Address</i>	() - <i>Telephone No.</i>
<i>City</i> _____ <i>State</i> _____ <i>Zip</i> _____	<i>Monthly Pay:</i> _____ Starting Ending
<i>Your Position and Duties:</i> _____	<i>Your Reason for Leaving:</i> _____
_____	_____
_____	<i>May we contact this employer for a reference?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No

<i>Name of Employer</i>	<i>Dates of Employment:</i> _____ From To
<i>Type of Business</i>	<i>Your Supervisor's Name</i>
<i>Street Address</i>	() - <i>Telephone No.</i>
<i>City</i> _____ <i>State</i> _____ <i>Zip</i> _____	<i>Monthly Pay:</i> _____ Starting Ending
<i>Your Position and Duties:</i> _____	<i>Your Reason for Leaving:</i> _____
_____	_____
_____	<i>May we contact this employer for a reference?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the Tule River Tribal Council to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Tule River Tribal Council. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

_____ *Date*

_____ *Applicant's Signature*

Employment Data

To be completed by applicant:

Application Date

Completion of this form is entirely voluntary, and all information will remain confidential and will not affect your application for employment. We are required by law to collect this information for equal opportunity employment purposes, and it will not become part of your personnel record if you are hired by this company.

Name: _____ SS#: _____

Position Applied for: _____ Department: _____

Sex: Male Female

Race/Ethnicity: American Indian/Alaskan Native

Asian/Pacific Islander

African American

Hispanic

Caucasian

Enrolled Tule River Tribal Member

Enrollment #: _____

Method of referral for employment at Tule River Tribal Council:

Tule River Tribal Employee

Newspaper advertisement

Internet

Friend/Relative

Eagle Mountain Casino employee

Job Announcement

Employment Agency

Other _____