

Swinomish Indian Fribal Community

A Federally Recognized Indian Tribe Organized Pursuant to 25 U.S.C. § 476 11404 Moorage Way LaConner, Washington 98257-0817

APPLICATION FOR EMPLOYMENT

Position Title:		Date:	
Name:	Street:	Apt:	
City:	State:	Zip:	
Home Phone:	Cell Phone:	Work Phone:	
E-Mail:	Social Security Number:	May we contact you at work:YesNo	

POLICIES AND INSTRUCTIONS:

- 1. The Tribe uses Native American preference in hiring.
- 2. The Tribe strives for a drug-free environment. Drug/alcohol screening at time of hire is mandatory in sensitive and hazardous positions where required by the job announcement/description or positions working with Tribal Youth.
- 3. Read the job announcement and position description carefully.
- 4. Complete all information on the application. **Do not write, "see Resume"** on the application.
- 5. Read the information in the signature area carefully, then sign and date the application.
- 6. Return the signed and completed application to the Personnel Office at the above address. Applications must be received in the Personnel Office by 5:00pm on the closing date

PERSONAL DATA

Does Swinomish Tribal Community currently employ you?YesNo
Have you ever been employed by the Swinomish Tribal CommunityYesNo
If so, What Position? Dates:
Do you claim Native American Preference?YesNo
If so, Tribal affiliation: Enrollment number:
Do you claim Veteran's Preference?YesNo
If "yes" attach copy of DD Form 214.
Do you have a valid Washington State Driver's license?YesNo
Have you been convicted of a crime within the last ten (10) years?YesNo
If "yes", please explain, including date(s) and court(s).
Can you perform the essential functions of the job with or without reasonable accommodation?YesNo
Are you legally able to work in this country?YesNo (Proof of status will be required if hired)
EDUCATION AND TRAINING

EDUCATIO	II AND INAIMING			
Type of	School Name and	Major Subject	Years	Graduate? Y/N
School	Location		Completed	Degree & type
High				
School				
College				
(Undergrad)				
College				
(Graduate)				
Business/				
Vocational				
Trade/				
Other				
Military				

SKILLS AND ABILITIES Computer Operation (Specify proficiency level, low, medium, or high and software used)			
Equipment Operation (Specify equipment and proficiency level – low, medium or high):			
Other Skills and abilities:			
Previous Employment:	Please list 10 y	ears with the most rece	nt employment first
EMPLOYER:		Employed From:	to
Address:		City:	State:
Job Title:	Duties:		
Reason for Leaving			
EMPLOYER:		Employed From:	To:
Address:		City:	State:
Job Title:	Duties:		
Reason for Leaving			
EMPLOYER:		Employed From:	To:
Address:		City:	State:
Job Title:	Duties:		
Reason for Leaving:			
EMPLOYER:		Employed From:	To:
Address:		City:	State:
Job Title:	Duties:		

Reason for Leaving:

EMPLOYER:		Employed Fro	om: To:
Address:		City:	State:
Job Title:	Duties:		
Reason for Leaving:			
EMPLOYER:		_ Employed Fro	m: To:
Address:		City:	State:
Job Title:	Duties:		
Reason for Leaving:			
Workshops or On-The	-Job Training		
Location of Training	Training Course	# Of Hours	Certificate of Completion
		<u> </u>	
Additional Information Please include any addit		t is relevant to th	sic position, including
second languages, specia			ns position, including

REFERENCES

Please list three (3) non-relatives whom you have known for at least one year

Name	Title/Relationship	Current Address	Current Telephone

Signature and Affirmation

This application and any attachments become official records of the Swinomish Tribal
Community and cannot be returned. Please make a copy for your records before
submitting. The Tribe has a confidentiality policy regarding the hiring process.

I hereby certify that the information on this application is true, correct and complete to the best of my knowledge and belief. I authorize investigation of information given in this application. I understand misrepresentation or omission of facts is cause for rejection of my application or disciplinary action, including dismissal, if hired. I understand that if I am hired, my employment is subject to the Swinomish Tribal Community Policy and Procedures Manual, and I consent to a comprehensive background investigation to include a criminal history background check, if employment is offered and accepted.

Applicant	Date:
Signature:	