



APPLICATION FOR EMPLOYMENT UPPER SKAGIT INDIAN TRIBE

25944 Community Plaza Way • Sedro-Woolley, WA 98284
Phone (360) 854-7000 • Fax (360) 854-7004

Date of Application: _____

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

PLEASE PRINT ANSWERS TO ALL QUESTIONS. Answer all questions completely. If a question does not apply, write "N/A" in that space. If space provided is not sufficient for a complete answer or you wish to furnish additional information, attach additional sheet(s) of paper and number answer to correspond with the questions or section. Incomplete, illegible, or unsigned applications will not be considered. All information provided to the Upper Skagit Indian Tribe shall only be used to verify your qualifications as an applicant for employment with the Upper Skagit Indian Tribe. Be advised, in some instances we may require additional information to process your application.

PERSONAL INFORMATION

Full Name: _____

Last

First

M.I.

DOB: _____ Maiden Name: _____

Other Names Used: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Mailing address (if different): _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Message Phone: _____

Email Address: _____

First Emergency Contact – Name: _____

Relationship to you: _____ Phone: _____

List any previous residences you have lived at in the past 10 years:

Street address	City	State	Zip Code

Have you ever been convicted of a:

misdemeanor? yes no gross misdemeanor? yes no felony? yes no

If so, please explain: _____

Are you currently on: parole? yes no probation? yes no

If so, please explain: _____

Have you ever served in the Armed Services? ___ yes ___ no

Served from: _____ to _____

Branch: _____ Type of discharge: _____

Do you have a current valid Driver's License? ___ yes ___ no

Issuing State: _____ Driver's License Number: _____

Do you have any driver license or insurance restrictions? ___ yes ___ no

Is so, please explain: _____

Are you a U.S. Citizen?* ___ yes ___ no

If other than a U.S. Citizen, do you have a work permit for the U.S.? ___ yes ___ no

** All persons, upon hiring, must verify citizenship status or valid authorization to work in the U.S.*

GENERAL INFORMATION

What position(s) are you applying for? **(Must be answered for application to be considered)**

Date of Application: _____

Do you have any licenses or certifications applicable to the position(s) you are applying for? If so, please list: _____

How did you learn of this employment opportunity? _____

Have you ever been employed by the Upper Skagit Tribe or its affiliates? yes no

If yes, which division? _____ Dates : _____ to _____

Position held: _____ Name of Supervisor: _____

If selected, when would you be available for employment? _____

Expected rate of pay _____ Willing to work weekends? yes no

Willing to work flexible work hours? yes no

If applicable to the position, can you lift at least 50 lbs? yes no

What type of employment are you seeking?

full-time part-time on-call temporary

AFFILIATIONS

Are you a member of the Upper Skagit Tribe? yes no Enrollment Number: _____

Are you enrolled in another Federally Recognized Indian Tribe? yes no

If yes, tribe: _____ Enrollment Number: _____

EMPLOYMENT HISTORY

List all employment held in the last ten years beginning with the last or present employment. If you feel that your experience beyond ten years is important to consider, please include it. Use additional sheets if necessary. If unemployed for a period of time, indicate dates and reasons for unemployment. Be advised, we may contact current or former employers unless indicated otherwise.

1) Name of Current Company/Employer: _____

Address: _____

Telephone: _____ Dates Employed: From _____ to _____

Position Title: _____ May we contact this employer? yes no

Job duties (in detail): _____

Was this a training position? ___ yes ___ no Were you a supervisor? ___ yes ___ no

If yes, number of staff supervised? _____ How long were you a supervisor? _____

Hourly or annual wage: _____ Supervisor's Name: _____

Reason for Leaving: _____

2) Name of Company/Employer: _____

Address: _____

Telephone: _____ Dates Employed: From _____ to _____

Position Title: _____ May we contact this employer? yes no

Job Duties (in detail): _____

Was this a training position? ___ yes ___ no Were you a supervisor? ___ yes ___ no

If yes, number of staff supervised? _____ How long were you a supervisor? _____

Hourly or annual wage: _____ Supervisor's Name: _____

Reason for Leaving: _____

3) Name of Company/Employer: _____

Address: _____

Telephone: _____ Dates Employed: From _____ to _____

Position Title: _____ May we contact this employer? yes no

Job Duties (in detail): _____

Was this a training position? ___ yes ___ no Were you a supervisor? ___ yes ___ no

If yes, number of staff supervised? _____ How long were you a supervisor? _____

Hourly or annual wage: _____ Supervisor's Name: _____

Reason for Leaving: _____

4) Name of Company/Employer: _____
 Address: _____
 Telephone: _____ Dates Employed: From _____ to _____
 Position Title: _____ May we contact this employer? yes no
 Job Duties (in detail): _____

 Was this a training position? ___ yes ___ no Were you a supervisor? ___ yes ___ no
 If yes, number of staff supervised? _____ How long were you a supervisor? _____
 Hourly or annual wage: _____ Supervisor's Name: _____
 Reason for Leaving: _____

EDUCATION HISTORY

Check highest grade completed: GED 8 9 10 11 12 or higher

Higher education completed: Associate's Bachelor's Master's Doctorate

COLLEGE/VOCATIONAL TRAINING/APPRENTICESHIPS:

Institution: _____ Course: _____

Dates: _____ Degree/certificate: _____ Online? yes no

Institution: _____ Course: _____

Dates: _____ Degree/certificate: _____ Online? yes no

Institution: _____ Course: _____

Dates: _____ Degree/certificate: _____ Online? yes no

Institution: _____ Course: _____

Dates: _____ Degree/certificate: _____ Online? yes no

Institution: _____ Course: _____

Dates: _____ Degree/certificate: _____ Online? yes no

REFERENCES

List two character references who are not relatives:

Name: _____ Telephone _____

Address: _____

Occupation: _____ Years Acquainted: _____

Name: _____ Telephone _____

Address: _____

Occupation: _____ Years Acquainted: _____

APPLICABLE WORK SKILLS

COMPUTER USAGE (Check any programs in which you are proficient.)

Windows 7 (or up) Access Excel Office 2010

Other software program(s): _____

OFFICE EQUIPMENT (Check any equipment in which you are proficient.)

Copiers Fax Machines Multi-line Phone Systems Postage Meters

Other: _____

PERSONAL BACKGROUND INVESTIGATION AUTHORIZATION/WAIVER

I understand that the Upper Skagit Indian Tribe (hereinafter "USIT") only employs those who possess a legal right to work in the United States. I possess that right and agree to provide valid authorization as consideration for hire.

By completing this application, I hereby authorize USIT to investigate my past record and to ascertain any information which may concern my record and character. I authorize all of my former employers, all education institutions which I have attended, all branches of the U.S. Military service which I have served, all credit bureaus, all courts systems, all references which I have provided and all of their representatives to furnish USIT or its representatives all information concerning me. In addition, I agree to hold harmless and to release all foregoing entities and individuals from any and all claims I may have, or which might arise against any and/or all of them, including USIT as a result of their furnishing information to USIT. I understand that any omission or false information contained in the application may result in immediate discharge.

I agree to take or submit to any examination (physical, psychological, or otherwise) that USIT may lawfully request as a condition of employment, present or future.

Applicant's Name (printed) _____ Date: _____

Applicant's Signature: _____

THIS SECTION MUST BE COMPLETED

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND ACKNOWLEDGE WITH YOUR SIGNATURE.

All answers and statements made herein are true and complete to the best of my knowledge, and I understand that untruthful or misleading answers are cause for rejection of my application, removal of my name from future applications being considered for position openings, or subsequent dismissal if hired. Furthermore, I hereby give the Upper Skagit Tribe permission to verify all information of this application.

Applicant's Signature _____ Date: _____

Applicant's Name (printed): _____

I understand that if employed, I am not guaranteed a specific number of hours per week. I further understand that if employed, I may be required to work overtime.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between USIT and me for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon USIT unless made in writing. Only the properly authorized representative of the USIT has the authority to enter into any agreement for employment for a specified period of time or to make any policies or practices in accord with Tribal Council authority and directives. I understand that employment manuals, handbooks, policy statements, or other material that may be distributed to me during the course of my employment shall not be considered an employment contract. If any employment is established, I understand that I have the right to terminate employment with or without cause at any time and that USIT retains a similar right.

I certify that all statements made on or in connection with this application are true and correct, and that any omission of material of a material fact may result in rejection of my application, removal of my name from applications being considered for position openings, or subsequent dismissal if hired.

Applicant's Signature _____ Date: _____

Applicant's Name (printed): _____