



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

If 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: \_\_\_\_\_

When would you be available for employment? \_\_\_\_\_

What rate of pay would you accept? \_\_\_\_\_ Willing to work weekends?  yes  no

Willing to work overtime?  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.

Name of Company/Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_

Position Title: \_\_\_\_\_

Job Duties (in detail): \_\_\_\_\_

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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? \_\_\_\_\_  
Last salary or annual wage: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Name of Company/Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_  
Position Title: \_\_\_\_\_  
Job Duties (in detail): \_\_\_\_\_  
\_\_\_\_\_

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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? \_\_\_\_\_  
Last salary or annual wage: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Name of Company/Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_  
Position Title: \_\_\_\_\_  
Job Duties (in detail): \_\_\_\_\_  
\_\_\_\_\_

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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? \_\_\_\_\_  
Last salary or annual wage: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Name of Company/Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_

Position Title: \_\_\_\_\_

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? \_\_\_\_\_

Last salary or annual wage: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Name of Company/Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_

Position Title: \_\_\_\_\_

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? \_\_\_\_\_

Last salary or annual wage: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

### EDUCATION HISTORY

Circle/check highest primary grade completed. \_\_\_ GED or \_\_\_ 8 \_\_\_ 9 \_\_\_ 10 \_\_\_ 11 \_\_\_ 12 or \_\_\_ higher

COLLEGES ATTENDED:

Names/Locations:	Course Pursued:	Dates:	Degree/Diploma
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MISCELLANEOUS SCHOOLING/TRAINING:

Names/Locations: Course Pursued: Dates: Certificate/Diploma

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

May we inquire of your present employer for a reference? \_\_\_ yes \_\_\_ no

List three character references who are not relatives:

Name: \_\_\_\_\_ Telephone \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years Acquainted: \_\_\_\_\_

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: \_\_\_\_\_

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

\_\_\_ Copiers \_\_\_ Fax Machines \_\_\_ Multi-line Phone Systems \_\_\_ Postage Meters

Other: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**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: \_\_\_\_\_

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: \_\_\_\_\_

**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 Signature \_\_\_\_\_ Date: \_\_\_\_\_