



APPLICATION FOR EMPLOYMENT

Colville Confederated Tribes Tribal Employment Rights Office



(Please Print All Information)

NOTICE: Incomplete applications will not be accepted or processed. Applicant is responsible to submit a completed and signed application date as well as any required attachments. Please make sure your application is complete and relevant to the job you are applying for. Applicant is responsible to call in daily for job search. Applications will be good for six (6) months.

Personal Data			
Last Name	First Name	M.I.	Other Names/Alias Used
Mailing Address: Street/PO Box	City	State	Zip Code
			Telephone Number (Required)
			Home: () -
			Message: () -
E-Mail Address (optional)			

Employment Data			
Position interest:			
Are you claiming Indian preference? ENROLLMENT NUMBER - <i>Valid proof of preference required</i>			
1. <input type="checkbox"/> CCT Member	_____	4. <input type="checkbox"/> Other Tribe	_____
2. <input type="checkbox"/> CCT Descendent	_____	5. <input type="checkbox"/> Non-Indian	_____
3. <input type="checkbox"/> CCT Spouse	_____		
VETERAN'S PREFERENCE? (For CCT positions only)	Branch of Service	Service Dates	Honorably Discharged?
<input type="checkbox"/> - Yes <input type="checkbox"/> - No		From: To:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Education Background		
List last high school attended. Beginning with the recent – list all colleges, vocational, and military service schools attended. * Please attach proof of certification from an accredited college for educational verification & educational consideration *		
Do you have a High School Diploma or GED? <input type="checkbox"/> Yes <input type="checkbox"/> No	School Name	Telephone Number
Name & Location of School	Graduate: Yes or No	Major Course
College/University		
College/University		
College/University		
Vocational/Technical School		

Specialized Skills/Training

Training

<input type="checkbox"/> Auto Mechanics	<input type="checkbox"/> Carpentry	<input type="checkbox"/> Computer Skills	<input type="checkbox"/> Construction
<input type="checkbox"/> Clerical	<input type="checkbox"/> Construction – Roads	<input type="checkbox"/> Data Processing	<input type="checkbox"/> Electrician
<input type="checkbox"/> Electronics apprentice	<input type="checkbox"/> Heavy Equipment	<input type="checkbox"/> hospitality	<input type="checkbox"/> Hotel Operations
<input type="checkbox"/> Landscaping	<input type="checkbox"/> Medical billing	<input type="checkbox"/> Nursing	<input type="checkbox"/> Office Skills
<input type="checkbox"/> Plastering	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Refrigeration	<input type="checkbox"/> Technology
<input type="checkbox"/> Truck Driver	<input type="checkbox"/> Welding/Metal working	<input type="checkbox"/> Other _____	

Equipment Operator:

<input type="checkbox"/> Asphalt Paver Months_____	<input type="checkbox"/> Grader Months_____	<input type="checkbox"/> Street Sweeper Months_____	<input type="checkbox"/> Dump Truck Months_____
<input type="checkbox"/> Backhoe Months_____	<input type="checkbox"/> Loader Months_____	<input type="checkbox"/> Tractor Months_____	<input type="checkbox"/> Excavator Months_____
<input type="checkbox"/> Boom Truck Months_____	<input type="checkbox"/> Roller Months_____	<input type="checkbox"/> Processor Months_____	<input type="checkbox"/> Forklift Cert. Months_____
<input type="checkbox"/> Bulldozer Months_____	<input type="checkbox"/> Scraper Months_____	<input type="checkbox"/> Truck Driver Months_____	<input type="checkbox"/> Front Loader Months_____
<input type="checkbox"/> Crane cert/hrs Months_____		<input type="checkbox"/> Skidder Months_____	<input type="checkbox"/> Bob Cat Months_____
		<input type="checkbox"/> Other _____	

Building Trades:

<input type="checkbox"/> Asbestos Removal Months_____	<input type="checkbox"/> Electrician Months_____	<input type="checkbox"/> HVAC Months_____	<input type="checkbox"/> Millwright Months_____
<input type="checkbox"/> Brick & Stone Mason Months_____	<input type="checkbox"/> Fence Builder Months_____	<input type="checkbox"/> Insulation Months_____	<input type="checkbox"/> Painter Months_____
<input type="checkbox"/> Cement Mason Months_____	<input type="checkbox"/> Flooring Months_____	<input type="checkbox"/> Iron Worker Months_____	<input type="checkbox"/> Pipe Laying Months_____
<input type="checkbox"/> Sheet Metal Worker Months_____	<input type="checkbox"/> Framer Months_____	<input type="checkbox"/> Metal Worker Months_____	<input type="checkbox"/> Welder Months_____
<input type="checkbox"/> Road Construction Months_____	<input type="checkbox"/> Glazier Months_____	<input type="checkbox"/> Mechanic Months_____	Drywall
<input type="checkbox"/> Carpenter Months_____	<input type="checkbox"/> Other: _____		<input type="checkbox"/> Tapers Months_____
			<input type="checkbox"/> Muders Months_____
			<input type="checkbox"/> Hangers Months_____

Laborer:

Flagger: Exp Date: _____

Clerical:

<input type="checkbox"/> Word Processing Months_____	<input type="checkbox"/> Receptionist Months_____	<input type="checkbox"/> Typist WPM_____ Months_____	<input type="checkbox"/> Data Entry Months_____
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Food/beverages Service:

<input type="checkbox"/> Point of sale (cashier) Months_____	<input type="checkbox"/> Host/Hostess Months_____	<input type="checkbox"/> Auditor Months_____	<input type="checkbox"/> Maintenance Months_____
<input type="checkbox"/> Banquets Months_____	<input type="checkbox"/> Server Months_____	<input type="checkbox"/> Accounting Months_____	<input type="checkbox"/> Slots Months_____
<input type="checkbox"/> Steward (Dishwasher) Months_____	<input type="checkbox"/> Janitorial (EVS) Months_____	<input type="checkbox"/> Cage Operations Months_____	<input type="checkbox"/> Bartender Months_____
<input type="checkbox"/> Gaming/Hospitality Months_____	<input type="checkbox"/> Valet Driver Months_____	<input type="checkbox"/> Dealer Months_____	<input type="checkbox"/> Busser Months_____
<input type="checkbox"/> Human Resources Months_____	<input type="checkbox"/> Security Officer Months_____	<input type="checkbox"/> Front Desk Months_____	<input type="checkbox"/> Cook Months_____
<input type="checkbox"/> Purchasing/Receiving Months_____	<input type="checkbox"/> Housekeeping Months_____		

Misc Experience:

_____	_____
_____	_____

Employer Name		Address		Phone:
Job Title: (Print)	Start Date:	End Date:	Reason For Leaving:	
Supervisor Name & Title:	Start Wage	End Wage	Eligible For Rehire?	[] - YES
				[] - NO
Provide a detailed description of the duties you performed, equipment operated, special skills gained, etc. Use the back of this page if more space is required.				

Employer Name		Address		Phone:
				(
Job Title: (Print)	Start Date:	End Date:	Reason For Leaving:	
Supervisor Name & Title:	Start Wage	End Wage	Eligible For Rehire?	[] - YES
				[] - NO
Provide a detailed description of the duties you performed, equipment operated, special skills gained, etc. Use the back of this page if more space is required.				

Current or past Tribal Program Participation:				
TANF <input type="checkbox"/>	Employment and Training <input type="checkbox"/>		Vocational Rehabilitation <input type="checkbox"/>	
Type	License #	State	Issued	Expires
Driver's License				
Notary				
Flagger's Card				
Do you have any of the following Licenses/Permits?				
Gaming	<input type="checkbox"/> Yes <input type="checkbox"/> No	Bartender	<input type="checkbox"/> - Yes <input type="checkbox"/> - No	
Food Handler	<input type="checkbox"/> Yes <input type="checkbox"/> No	Child Care	<input type="checkbox"/> - Yes <input type="checkbox"/> - No	
Legal	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other: _____	<input type="checkbox"/> - Yes <input type="checkbox"/> - No	

Have You Ever Had A License/Bond/Permit Listed Above Revoked or Suspended?	<input type="checkbox"/> - YES <input type="checkbox"/> - NO
If YES, Explain:	
Are you bondable?	<input type="checkbox"/> - YES <input type="checkbox"/> - NO

Criminal History	
Have You Ever Been Convicted of a Felony or Misdemeanor?	<input type="checkbox"/> - YES <input type="checkbox"/> - NO
You may be required to disclose the details of a "yes" response. Do you agree to provide this information as a condition of consideration for hire?	
<input type="checkbox"/> - YES <input type="checkbox"/> - NO	

Employee Statement of Accuracy and Authorization To Obtain Background Information				
I certify that all of the information given in this application is true, accurate, and complete. I understand any false or misleading information, or incomplete information on this application may result in my not being hired, or my immediate dismissal if I have been hired based upon any false or misleading information that I provided in this application.				
I give my consent to the Colville Tribe Employer (Tribes, CTFC, or CTEC) to conduct an investigation into my employment/work history and any pertinent information concerning my employment, criminal, financial and credit histories.				
This is my authorization for any of my previous employers to release my employment history with them, including, but not limited to, my performance level, attendance, and disciplinary records. I will hold harmless any previous employer for releasing this information.				
Applicant's Signature Affirming Above Statement				Today's Date
Last Name (Print)	First Name	MI	Maiden Name	Are you 18 or older?
				<input type="checkbox"/> - Yes <input type="checkbox"/> - No



Confederated Tribes of the Colville Reservation
TRIBAL EMPLOYMENT RIGHTS OFFICE
Post Office Box 150 - Nespalem, Washington 99155-0150
Office: (509) 634-2716 Fax: (509) 634-2740



Release of information
Colville Tribal Tero Program

I authorize the Colville Tribal Employment Rights Office (TERO) to provide information to:

- TANF
- Employment & training
- Child Support
- Human Resources
- Prospective Employers
- Spouse /significant other (name of individual)_____
- Other (please specify)_____

The sole purpose of this form is for clarifying specific employment and financial issues brought forth to TERO by authorized programs.

This information is intended to be confidential and does not super cede any Tribal or TERO Policy for services or exchange of information.

PRINT: _____

SIGN: _____

Date: _____

TERO STAFF: _____