

**APPLICATION  
FOR  
EMPLOYMENT  
NORTHERN CHEYENNE TRIBE**

HUMAN RESOURCE DEPARTMENT  
600 CHEYENNE AVENUE  
P.O. BOX 128  
LAME DEER, MT 59043  
(406) 477-6284  
FAX: (406) 477-8498

**WE CONSIDER APPLICATIONS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, MARITAL OR VETERAN STATUS, SEX, AND ANY OTHER LEGALLY PROTECTED STATUS.**

**PERSONAL INFORMATION**

|  |   |   |  |
|--|---|---|--|
| NAME   |   | DATE APPLICATION/TIME RECEIVED  |  |
| MAILING ADDRESS:   |   | SOCIAL SECURITY NUMBER  |  |
| TELEPHONE NUMBER(S):<br>HOME _____<br>WORK _____                 | DRIVERS LICENSE: (OPERATOR/CDL)<br>NUMBER: _____ STATE: _____<br>EXPIRATION DATE: _____ | ARE YOU A VETERAN? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF YES, BRANCH?<br>FROM: _____ TO: _____ |
| WHAT LANGUAGES DO YOU SPEAK FUENTLY?<br>READ? _____ WRITE: _____ |   | TRIBAL AFFILIATION _____<br>ENROLLMENT #: _____                             |  |

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR HIGH ISDEMEANOR WITHIN THE PAST TEN (10) YEARS? (FOR MOST JOBS, A CONVICTION OF A FELONY WILL NOT AUTOMATICALLY BE GROUNDS FOR DISQUALIFICATION.) HAVE YOU BEEN CONVICTED OF ANY MOVING TRAFFIC VIOLATIONS WITHIN THE PAST FIVE (5) YEARS? (YOU MAY BE SUBJECT TO A BACKGROUND CHECK) IF SO, WHEN, WHERE, AND DISPOSTION OF CASE.

**EMPLOYMENT DESIRED**

POSITION TITLE & LOCATION \_\_\_\_\_

|                                 |     |    |               |           |
|---------------------------------|-----|----|---------------|-----------|
| HAVE YOU WORKED FOR US BEFORE?  | YES | NO | IF YES, WHEN? | PRESENTLY |
| ANY RELATIVES WORKING WITH NCT? | YES | NO | IFYES, NAME?  |           |

**EDUCATIONAL BACKGROUND**

| TYPE OF SCHOOL    | NAME & ADDRESS | DATES OF ATTENDANCE<br>(FROM & TO) |          | GRADUATED | COURSE/MAJOR |
|-------------------|----------------|------------------------------------|----------|-----------|--------------|
|                   |                | MONTH/YR                           | MONTH/YR |           |              |
| HIGH SCHOOL/GED   |                |                                    |          |           |              |
| UNDERGRADUATE     |                |                                    |          |           |              |
| GRADUATE          |                |                                    |          |           |              |
| BUSINESS OR TRADE |                |                                    |          |           |              |
| OTHER             |                |                                    |          |           |              |

ANY OTHER EXPERIENCE, SKILLS, OR QUALIFICATIONS RELATED TO THE JOB YOU ARE SEEKING: \_\_\_\_\_

**WORK EXPERIENCE (LIST PRESENT OR MOST RECENT EMPLOYER FIRST)**

|  |   |   |
|--|---|---|
| 1.) NAME & ADDRESS OF EMPLOYER<br><br>TELEPHONE: | DATES OF EMPLOYMENT (MONTH/YR)<br>FROM: _____ TO: _____<br>TOTAL YEARS: _____ | SALARY RATE PER HOUR<br>START: _____ END: _____<br>OTHER: _____ |
|--|---|---|

|                                 |               |
|---------------------------------|---------------|
| NAME & TITLE OF YOUR SUPERVISOR | YOUR POSITION |
|---------------------------------|---------------|

DESCRIPTION OF JOB RESPONSIBILITIES: \_\_\_\_\_

NO. SUPERVISED: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

|  |   |   |
|--|---|---|
| 2.) NAME & ADDRESS OF EMPLOYER<br><br>TELEPHONE: | DATES OF EMPLOYMENT (MONTH/YR)<br>FROM: _____ TO: _____<br>TOTAL YEARS: _____ | SALARY RATE PER HOUR<br>START: _____ END: _____<br>OTHER: _____ |
|--|---|---|

|                                 |               |
|---------------------------------|---------------|
| NAME & TITLE OF YOUR SUPERVISOR | YOUR POSITION |
|---------------------------------|---------------|

DESCRIPTION OF JOB RESPONSIBILITIES: \_\_\_\_\_

NO. SUPERVISED: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

|  |   |   |
|--|---|---|
| 3.) NAME & ADDRESS OF EMPLOYER<br><br>TELEPHONE: | DATES OF EMPLOYMENT (MONTH/YR)<br>FROM: _____ TO: _____<br>TOTAL YEARS: _____ | SALARY RATE PER HOUR<br>START: _____ END: _____<br>OTHER: _____ |
|--|---|---|

|                                 |               |
|---------------------------------|---------------|
| NAME & TITLE OF YOUR SUPERVISOR | YOUR POSITION |
|---------------------------------|---------------|

DESCRIPTION OF JOB RESPONSIBILITIES: \_\_\_\_\_

NO. SUPERVISED: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

**REFERENCES**

| NAME & OCCUPATION | ADDRESS | TELEPHONE NUMBER |
|-------------------|---------|------------------|
|                   |         |                  |
|                   |         |                  |
|                   |         |                  |

**APPLICANTS CERTIFICATION AND AGREEMENT**

I HEREBY CERTIFY THAT THE FACTS SETS FORTH IN THE ABOVE EMPLOYMENT APPLICATION ARE TRUE AND COMPLETE TO BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE CONSIDERED SUFFICIENT CAUSE FOR DISMISSAL. YOU ARE HEREBY AUTHORIZED TO MAKE ANY INVESTIGATION OF MY PERSONAL HISTORY. LASTLY, I CONSENT TO DRUG TESTING BY GIVING A URINE SAMPLE, AND UNDERSTAND SHOULD THE SAMPLE TEST POSITIVE OR IF I REFUSE DRUG TESTING, THAT MAY BE CUASE FOR NON-HIRE.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_