

APPLICATION FOR EMPLOYMENT NORTHERN CHEYENNE TRIBE

HUMAN RESOURCE DEPARTMENT
600 CHEYENNE AVENUE
P.O. BOX 128
LAME DEER, MONTANA 59043
TELEPHONE NUMBER: (406) 477-6776 OR 477-8810
FAX NUMBER: (406) 477-8498

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

PERSONAL INFORMATION

Name: Last First Middle Initial				Date of Application/Time Received:	
Mailing Address: City State Zip				Social Security Number	
Telephone Number(s): Home: () Work: ()		Driver's License: (Operator/CDL/Chauffeur) Number: State: Expiration Date:		Are You A Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Branch? From: To:	
What Languages Do You Speak Fluently? Read? Write?			Tribal Affiliation:		
			Enrollment No:		
Have You Ever Been Convicted Of A FELONY Or HIGH MISDEMEANOR Within The Past Ten (10) Years? (For Most Jobs, A Conviction Of A Felony Will Not Automatically Be Grounds For Disqualification). OR Have You Been Convicted Of Any moving Traffic Violations Within The Last Five (5) Years? (You May Be Subject To A Background Check) If so, When, Where, and Disposition Of Case.					

EMPLOYMENT DESIRED

1 st Choice - Position Title & Location		2 nd Choice - Position Title & Location	
Have You Worked For Us Before? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, When? <input type="checkbox"/> Presently			
Any Relatives Working With NCT? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Name: Dept:			

EDUCATIONAL BACKGROUND

Type of School	Name & Address	Dates of Attendance (From & To)		Graduated	Course or Major
		Month/Year	Month/Year		
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Undergraduate					
Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business or Trade				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other				<input type="checkbox"/> Yes <input type="checkbox"/> No	

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 Telephone:	Dates of Employment (Month/Year) From: _____ To: _____ Total Years:	Salary Rate Per Hour Start: _____ End: _____ Other:
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Name & Title Of Your Supervisor

Your Position

Description of Job Responsibilities:

No. Supervised:

Reason For Leaving:

2.) Name & Address Of Employer Telephone:	Dates of Employment (Month/Year) From: _____ To: _____ Total Years:	Salary Rate Per Hour Start: _____ End: _____ Other:
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Name & Title Of Your Supervisor

Your Position

Description of Job Responsibilities:

No. Supervised:

Reason For Leaving:

3.) Name & Address Of Employer Telephone:	Dates of Employment (Month/Year) From: _____ To: _____ Total Years:	Salary Rate Per Hour Start: _____ End: _____ Other:
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Name & Title Of Your Supervisor

Your Position

Description of Job Responsibilities:

No. Supervised:

Reason For Leaving:

REFERENCES**(DO NOT LIST RELATIVES)**

Name & Occupation	Address	Telephone Number

APPLICANT'S CERTIFICATION AND AGREEMENT

I Hereby Certify That The Facts Sets Forth In The Above Employment Application Are True And Complete To The 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 Cause For Non-Hire.

Signature of Applicant

Date