

Confederated Tribes of the Chehalis Reservation

420 Howanut Rd (PO Box 536) Oakville, WA 98568 Phone: (360) 273-5911 | Fax: (360) 273-3861 www.ChehalisTribe.org Email: Recruiting@chehalistribe.org

APPLICATION FOR EMPLOYMENT

| (Please Print Clearly) | | | |
|--|--|--|--|
| Name | Date of Application | | |
| Last First MI. | | | |
| Present Address | Position(s) Applied For | | |
| Street | 1. | | |
| City State Zip | 2. | | |
| Residence Telephone: () | | | |
| Cellular Phone: () | | | |
| Email Address: | | | |
| QUALIFICATIONS: <u>Must meet minimum job requirements for</u> specialized experience you feel relates to the position applied for the colleges, degrees, licenses, vocational or technical programs, militar | t would help you perform the work such as schools, | | |
| School Name City/ST | *Degrees, Licenses, Specialty Achievements, Experience or Training | | |
| High School: | () Diploma or () G.E.D/_ Date | | |
| Associate: | () Graduated/ Date | | |
| Bachelors: | () Graduated/ Date | | |
| Other: | () Graduated/_ Date | | |
| Other: | () Graduated/ Date | | |
| * Please attach verification of degrees, certificates of completion, training received, college courses taken, and/or seminars attended. | | | |
| Have you worked for the Chehalis Tribe before? () Yes () No Department/Entity: | Are you 18 years of age or older? () Yes () No Do you have a valid driver's license? () Yes () No State: | | |
| Are you claiming Tribal Preference? () Yes () No If yes, please provide the federally-recognized tribe you are enrolled | with: | | |
| Are you legally eligible for employment in the United States? () Y Successful applicants will be required to provide proof of identity ar * Required by the Immigration Reform and Control Act | | | |
| Are there any days of the week you are not available to work? () N What shifts are you willing to work? () Day () Swing () Night | | | |
| If hired, on what date are you available to begin employment? | | | |
| Omissions or intentional missenses entation may lead to the termination of any big | | | |

EMPLOYMENT EXPERIENCE: Beginning with your most recent position, please complete and account for a minimum of ten years of employment including U.S. military service (branch, dates, etc).

Do not enter "see resume" as incomplete applications may disqualify you from further consideration.

| Present or Last Employer (Company Name) | Type of Business | Telephone | | |
|---|--------------------|-----------|--|--|
| Address | Hire Date | Date Left | | |
| Job Title | Reason for Leaving | | | |
| Job Duties and Responsibilities | | | | |
| | | | | |
| | | | | |
| Previous Employer | Type of Business | Telephone | | |
| Address | Hire Date | Date Left | | |
| Job Title | Reason for Leaving | | | |
| Job Duties and Responsibilities | l | | | |
| | | | | |
| | | | | |
| Previous Employer | Type of Business | Telephone | | |
| Address | Hire Date | Date Left | | |
| Job Title | Reason for Leaving | | | |
| Job Duties and Responsibilities | | | | |
| - | | | | |
| | | | | |
| Previous Employer | Type of Business | Telephone | | |
| Address | Hire Date | Date Left | | |
| | | Date Left | | |
| Job Title | Reason for Leaving | | | |
| Job Duties and Responsibilities | | | | |
| | | | | |
| | | | | |
| Previous Employer | Type of Business | Telephone | | |
| Address | Hire Date | Date Left | | |
| Job Title | Reason for Leaving | | | |
| Job Duties and Responsibilities | | | | |
| - | | | | |
| | | | | |
| | | | | |

Attach additional sheets if necessary.

CHEHALIS TRIBE APPLICATION FOR EMPLOYMENT & AUTHORIZATION FOR RELEASE OF INFORMATION

- 1. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information.
- 2. I certify that the facts and information in the application and in the attachments or supporting documents are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission, as well as any misleading statements or omissions, will be cause for denial of employment or immediate termination, regardless of when or how discovered.
- 3. I understand that I may be required to submit to pre- and/or post-employment drug and alcohol screening. I agree to such testing at the Chehalis Tribe's expense. I authorize the release of test results to the Tribe and its use to evaluate my suitability for employment. I also release the Tribe from any and all liability associated with the testing.

REFERENCES: Please list three (3) professional references* who can attest to your professional skills and experience. Reference letters do not substitute for completing this section, however, may be included with application.

*Names should be of three persons, not related to you, who have known you at least three (3) years.

| Name | Address, Phone, Email | Company | | Years Known |
|------------|----------------------------------|---------|-----------|-------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| | S USE ONLY: References Verified? | | 2. Y/N 3. | Y/N |
| Signature: | | Date: | | |



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RELEASE FOR BACKGROUND/CRIMINAL INVESTIGATION

I authorize the investigation of all matters which the Chehalis Tribe deems relevant to my qualifications for employment, including all statements made in my application for employment and in any documents and supporting attachments. I authorize the Chehalis Tribe to request and receive such information, including a check for criminal convictions, and I release from liability any persons (such as former supervisors) or employers supplying it. I also release the Chehalis Tribe from all liability which might result from making the investigation.

| Last Name | First Name | Middle Nam | e For | mer Name(s) |
|---|---|---|---------------------------------------|--|
| Date of Birth | | Social | l Security Nun | nber |
| | se Number State (nly if you do not have a State | | Issue Date | Expiration Date |
| Chehalis Tribe will is which you are apply | VICTIONS: Conviction of a province of a convertigate only criminal conving. Factors such as the natural viction and/or completion of sidered. | victions that relate t re and gravity of the | to your fitness t e crime, the len | o perform the job for gth of time that has |
| Have you ever been | convicted of a felony? () Ye | es, Class: | | () No |
| | 1: | | | |
| Under Federal Law, all convicted sex and | specifically, the Adam Walsh d/or kidnapping offenders are ictions in which they live, wo | h Child Protection a | and Safety Act or with the appro | , |
| The Chehalis Tribal sex and/or kidnappin Chehalis Reservation | Code has adopted this registring offenders who live, work, on or on property owned by the is Tribal Law Enforcement. | ration requirement upor attend school with | ander Subsection | boundaries of the |
| correct to the best of | ve statements and do hereby f my knowledge. Omissions o hiring process or tribal emplo | or intentional misro | epresentation n | ay lead to the |
| Signature | | Date _ | | |
| The above | ve information will remain con | fidential and senare | ite from your or | nlication |

EQUAL EMPLOYMENT OPPORTUNITY AND TRIBAL PREFERENCE

It is the Chehalis Tribe's policy to seek and employ the best qualified personnel and to provide equal opportunity for the hiring and advancement of employees, and to administer these activities in a manner which will not discriminate against any person because of race, color, religion, sex, or national origin. The Chehalis Tribe practices Tribal Preference in accordance with Chehalis Tribal Code and Personnel Policies.

To monitor the effectiveness of the Chehalis Tribe's recruitment efforts to provide Equal Employment Opportunity and Tribal Preference to its applicants, the Tribe requests your voluntary cooperation by indicating:

| Race or Ethnic Ori | gin (mark all that apply) | : | | |
|--|--|---------------------------------------|---|--------------------------|
| () Asian | | () Native Hawaiia | () Native Hawaiian or other Pacific Islander | |
| () Black or African | American | () White/Non-His | () White/Non-Hispanic | |
| () Hispanic or Latin | no | () Other: | () Other: | |
| () Native American | n/Alaskan | Veteran: () Yes | () No | |
| Gender: () Female () Male | | Branch of Military | • | |
| | VERIFICAT | ION OF TRIBAL PRI | EFERENCE | |
| () Enrolled Chehal | nrolled Chehalis Tribal Member Enrollment Number | | | |
| () Spouse of an En | rolled Chehalis Tribal Mo | ember Spouse's | Enrollment Nu | umber |
| () Enrolled Membe (Attach copy of | er of another Tribe Tribal ID or CDIB) | Name of T | Tribe | |
| | ADDI | TIONAL INFORMAT | TION | |
| How did you <u>first</u> h | near of this opening? | | | |
| Chehalis Tribe | | | | |
| () Posting | () Tribe's Website | () From a Tribal Mer | |) From a Tribal Employee |
| Website: () WorkSourceWA () Indeed () LinkedIn () ZipRecruiter () CareerBuilder () Craigslist () School/College () Other/Please list | Website: | | | |
| Position(s) applied | | · · · · · · · · · · · · · · · · · · · | | |
| | 2. 3. | | | |

The above information will remain confidential and separate from your application.