

Application Check List:

- ☐ Complete Application; signed and dated.
- ☐ *Proof of diplomas, certificates or degrees relating to the position applying for.*
- ☐ *3 Letters of reference including contact information.*



Application For Employment

Indian Township Tribal
Government



Application For Employment

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.

(PLEASE PRINT)

Position(s) Applied For:	Date of Application:
How did you learn about this position?	
<input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Walk-In	
<input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other	

Last Name	First Name	Middle Initial	
Address:	City	State	Zip Code
Telephone Number(s)	Social Security Number / /		
Email:			

If you are under 18 years of age, can you provide required proof of your eligibility to work? ☐ Yes ☐ No

Have you ever filed an application with us before? ☐ Yes ☐ No

Have you ever been employed with us before? ☐ Yes ☐ No

Are you currently employed? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? (*Proof of citizenship or immigration status will be required upon employment*) ☐ Yes ☐ No

On what date would you be available for work?

Are you available to work: ☐ Full time ☐ Part time ☐ Shift work ☐ Temporary

Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No

Can you travel if a job requires it? ☐ Yes ☐ No

Have you been convicted of a crime within the last seven years? (Conviction will not necessarily disqualify an applicant from employment) ☐ Yes ☐ No

If yes, please explain: _____

Education

Level of Education	Name and address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other(Specify)				

Indicate any foreign language you can speak, read and /or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills and extracurricular activities:

Describe any job-related training received in the United States military:

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

1. Employer:	Dates Employed		Work Performed
	From	To	
Address:			
Telephone Number(s)	Hourly Rate/Salary		
	Starting	Final	
Job Title:			Supervisor:
Reason for Leaving:			
2. Employer:	Dates Employed		Worked Performed
	From	To	
Address:			
Telephone Number(s)	Hourly Rate/Salary		
	Starting	Final	
Job Title:			Supervisor:
Reason for Leaving:			
3. Employer:	Dates Employed		Work Performed
	From	To	
Address:			
Telephone Number(s)	Hourly Rate/ Salary		
	Starting	Final	
Job Title:			Supervisor:
Reason for Leaving:			
4. Employer:	Dates Employed		Worked Performed
	From	To	
Address:			
Telephone Number(s)	Hourly Rate/Salary		
	Starting	Final	
Job Title:			Supervisor:
Reason for Leaving:			

**If you need additional space, please continue on a separate sheet of paper*

List professional, trade, business or civil activities and offices held. (You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status)

Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized skills:

Licenses & Certificates(list):

Microsoft Office:

☐ Word ☐ Excel ☐ Publisher ☐ PowerPoint

State any additional information you feel may be helpful to us in considering your application.

Please attach all copies of Diplomas, Certificates or Degrees referenced in this application.

References

***Please attach 3 letters of reference to application (Must include their contact information)**

Special Skills and requirements: Potential Staff are required to acquire or supply the program with current certifications for employment: Mandated reporter, Pediatric and adult First Aid and CPR, Health and safety standards (MRTQ), Must submit a certificate of approval to provide childcare services through DHHS Fingerprint background check.

Please list any specific skills, certifications, or special licenses that are applicable to the position you are applying for.

Please check if you have any of the required trainings and include current certificates with this application: Any ECE degrees,certificates.	Mandated Reporter	First Aid & CPR	DHHS Background
	MRTQ-Registered	Health & Safety	ECEdegrees
	Other		

What is your experience level with office machines, computers/equipment, and software?

Have you worked for a daycare before?	Yes	No
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If Yes, please explain what your duties were and what position you held:

Applicant's Statement

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period not to exceed 1 year. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of and "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employee relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Application complete ☐ Yes ☐ No

Arrange Interview ☐ Yes ☐ No

Background Check ☐ Yes ☐ No
(If necessary)

Remarks: _____

Personnel

Date