

Summer Internship Job Application San Xavier Allottees Association (SXAA)

Title of Position Applying for: Student Summer Intership					Date:				
How did you learn about this vacancy:									
Personal Information									
Name:									
Name: Last First Are you known by other names while previously employed?							Middle		
Alo you known by	ourer names w	Time providuoly emp	oloyeu.						
If YES, list name:	1 4		F:1				NA: dalla		
	Last		First				Middle		
Mailing Address:	P.O. Box/ Stre	eet Address		City		State		Zip Code	
Address:									
	Street Addres			City		State		Zip Code	
Tribal Affiliation :				Phone:	(_)			
Guardianship									
Name of Parent/G	uardian:				Rela	tionship:			
Address:								-	
		State:	Zip:		E-N	lail:			
References									
List two (2) individuals other than a relative or supervisors.									
Name	Address			City/State/Zip				Telephone Number	
Name	Address			City/State/Zip			Tolonhono	Telephone Number	
Education Experie	nce	Address		Olly/Stat	6/ZIP		relephone	Number	
High Cabaali						OI			
High School:						Grade:			
List any job-related knowledge or skills you may have for this position?.									
List any office equipment proficiencies/software/word processing applications you are familiar with?									

	Name and Address	Name and Address Course of Study Did you Graduate			List Degree(s) Awarded
High School			YES	NO	
College or Other			YES	NO	
Graduate School or Other			YES	NO	

(Submit copies of Degrees or Certificates)

List employment history, (start with the most recent). It is important to include **all** periods of employment; voluntary, training, military, etc. If more space is needed, use the same format on another piece of paper or a continuation sheet in the same format. Please explain gaps in employment

Job Title:		Supervisor's	s na	ıme:				
Company Name:	Supervisor's Title:							
Address:	Phone Number:							
City/State/Zip:	How many people did you supervise:							
Worked From (mo/yr):	To (mo/yr):	Starting pay: Endin			ing Pay:			
Average hours worked per week:		Reason for leaving:						
Describe Work Performed:								
General Information								
Are you employed now? YES NO	May we co	ontact your pre	eser	nt employer?	YES	NO		
Are you a US Citizen? YES NO	Are you over the age 18?	YES NO		(If you answered NO, employ minimum legal age)	yment is subject to	verification of		
D o you have a valid driver's license?					YES	NO		
D o you have any DUI's or major traffic	YES	NO						
Have you been convicted of a felony in the past ten (10) years which has not been annulled, expunged or sealed by a court? YES NO								
If Yes, please explain; include date, place, details and disposition of case (A conviction does not automatically mean that you cannot be considered for employment). Use a separate sheet of paper to complete this question.								
Are you proficient in O'odham langu	uage? (Understand, Spea	k, Read, Write	te)	Yes or				
No								
,	hereby declare that the inf					Marie and the state of the stat		

property of the San Xavier Allottees Association, Inc.

Name:

Date:

resulting interviews could result in termination of my employment. I understand the application and all supporting documents are the