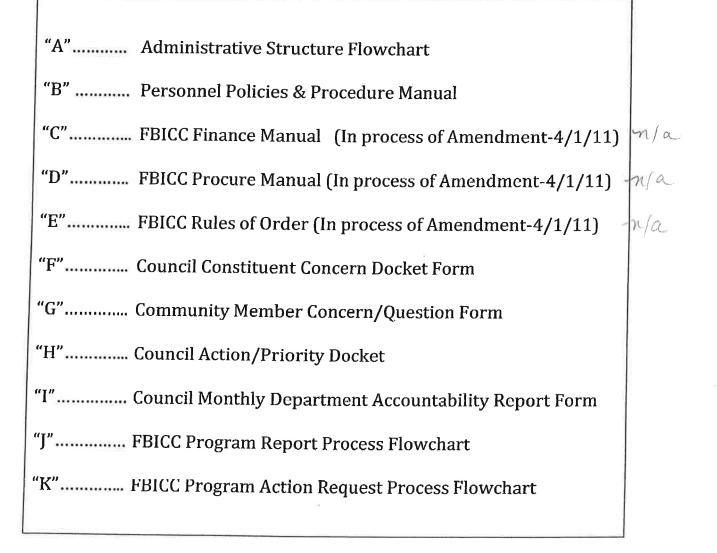
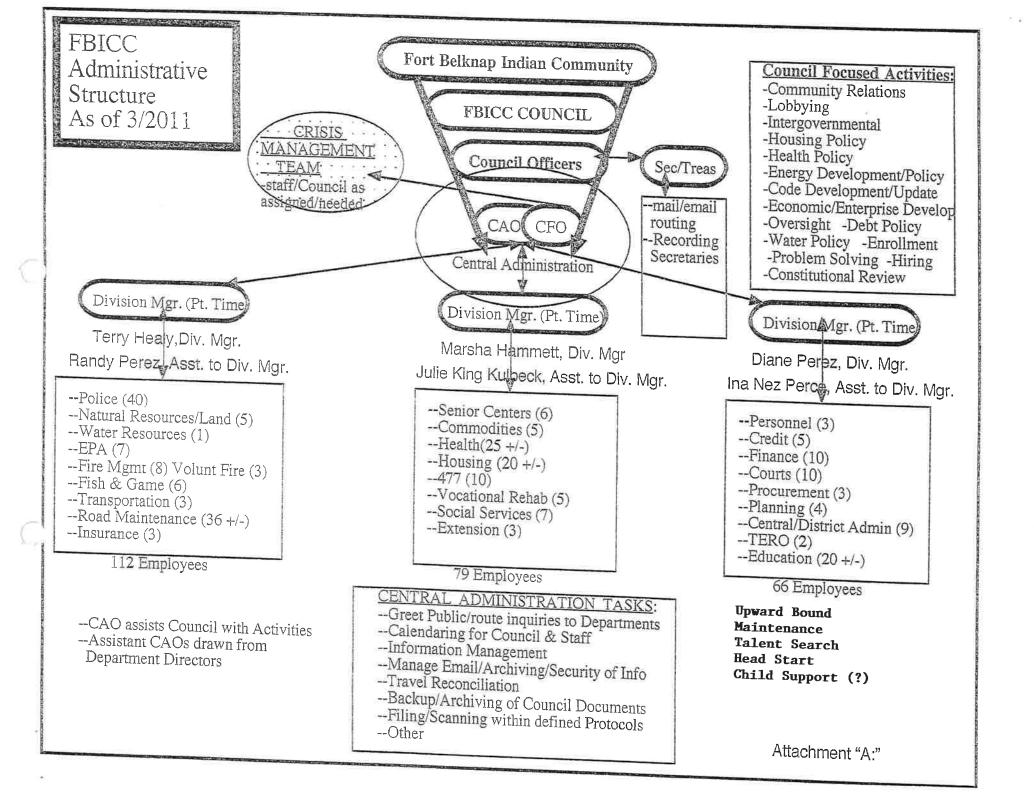
# ATTACHMENTS





230.3. All interviews and selections for <u>employees up to the position of Department</u> <u>Director shall be made by a team consisting of the interested Department Director, the</u> <u>supervising Division Manager and the Personnel Director, or their alternates, should</u> <u>conflicts of interest arise. The hiring of Department Directors positions and above shall</u> <u>be completed by the Personnel Committee of the FBCC.</u> The constitution of the Personnel Committee shall be set by resolution of the FBCC.

230.6 Upon completion of applicant screening, the Personnel Office representative handling the recruitment will rank acceptable applicants in order of suitability. The ranking of applicants will consider factors such as salary requirements, experience and education, as appropriate. Applications will be delivered to the *applicable hiring team or committee for action*, along with their ranking sequence as information. However, *each team or committee* reserves the right to interview all candidates which have been determined by the Personnel Office and the program's director to meet qualifications. The ranking of applicants by the Personnel Office is an advisory function only. *Each team or committee* has final authority over the selection of applicants.

230.8 The number of personnel to be interviewed will be determined by the *hiring team or committee*, in cooperation with the Personnel Office, based upon considerations of need, availability, cost and so on.....

231.2 While the decision regarding which candidate is to be hired remains with the <u>designated hiring team or committee</u>, the Personnel Office will conduct a final review prior to hiring the selected applicant. This is to ensure that, among other considerations, there is agreement concerning salary and position grades consistent with the procedures established by the FBCC for all employees. If the Personnel Office discovers a discrepancy between the <u>hiring team or committee</u>'s selection and established procedure, the matter must be referred back to the Personnel Committee for resolution.

520.7 Among the type of penalties supervisors may elect are:

- A. demotion D.
  - D. termination of employment
- B. reprimandC. loss of privileges
- F. transfer or reassignment
- F. suspension without pay

<u>Recommendations for demotion or termination of employees below the level of</u> <u>Department Director require approval of the Department Director, the Personnel Officer,</u> and the Division Manager of the Department. Recommendations for demotion or <u>termination of employees at the level of Department Director and above require approval</u> of a Division Manager, Chief Administrative Officer and Personnel Officer. A judge of the Tribal Court, the Chief Administrative Officer, the Secretary-Treasurer, the Executive Assistant to the Council and the Chief Finance Officer may only be terminated through action of the Council.

.

## **COUNCIL CONSTITUENT CONCERN DOCKET-2011**

| DOCKET<br>NO.: DESCRIPTION OF CONCERN/REQUESTOR |                         | i.                  | REVIEW COMPLETE w     |
|---|-------------------------|---------------------|-----------------------|
| NO.: DESCRIPTION OF CONCERN/REQUESTOR           | DATE REC'D: ASSIGNED TO | <u>): DEADLINE:</u> | supervisory Initials: |
| 011-1   |                         |                     |                       |
|   |                         |                     | 1                     |
|   | -                       | ł                   |                       |
| 2011-2  |                         |                     |                       |
|   |                         | F.                  |                       |
|   |                         | L                   |                       |
| 2011-3  |                         |                     |                       |
|   |                         |                     |                       |
|   |                         |                     |                       |
| 2011-4  |                         |                     |                       |
|   |                         |                     |                       |
|   |                         | 1.<br>              |                       |
| 2011-5  |                         |                     |                       |
|   |                         |                     |                       |
|   |                         |                     |                       |
| 2011-6  |                         | ł                   |                       |
|   |                         |                     |                       |
|   |                         |                     |                       |
| 2011-7  |                         |                     |                       |
|   |                         |                     |                       |
|   |                         |                     |                       |
| 2011-8  |                         |                     |                       |
|   |                         |                     |                       |
|   |                         | 1                   |                       |
| 011-9   |                         | 8                   | ÷                     |
|   |                         |                     |                       |
|   |                         |                     |                       |
| 011-10  |                         |                     |                       |
|   |                         |                     |                       |
|   |                         |                     |                       |
| 011-11  |                         |                     |                       |
|   |                         |                     |                       |
|   |                         |                     |                       |

Attachment "F"

Docket No.: \_

ATTACHMENT "G"

#### FORT BELKNAP INDIAN COMMUNITY COUNCIL

### **COMMUNITY MEMBER CONCERN/QUESTION**

1. Many community members have concerns/questions that sometimes get lost in the bureaucracy. Your concerns/questions are important to the Council. As a means to better respond to concerns/questions, this form has been developed to assist the process in routinely answering you. Here's how it works:

A. Fill out the following, or attach the information, if you've already written it out. (fill out as much as you feel comfortable)

B. This form will be docketed and assigned a deadline and a person to respond.

C. A written response will be provided—hopefully by the deadline assigned and a file will be created to keep track of the response.

D. If you want to check on your concern/question, check with administrative staff to check the docket/file.

| 2. Your Name:                          | Date: |
|--|-------|
| (Please Print)                         |       |
| 3. Your Address, Phone No. &/or email: |       |
| · · · · · · · · · · · · · · · · · · ·  |       |
|  |       |
| 4. Your concern/question               |       |
| 4. Your concern/question:              | (     |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
|  |       |
| Your Signature                         |       |

# COUNCIL ACTION/PRIORITY DOCKET-2010

| DOCKET<br>NO.: DESCRIPTION OF ACTION/PRIORITY | DATE OF |              | X         | <b>REVIEW COMPLETE w</b>                   |
|---|---------|--------------|-----------|--|
| Non Desert How of ACTION/PRIORITY             | ACTION: | ASSIGNED TO: | DEADLINE: | REVIEW COMPLETE w<br>supervisory Initials: |
| 011-1   |         |              |           |  |
|   |         |              | 1         |  |
|   |         |              | 2         | 1  |
|   |         |              | 3         |  |
|   |         |              | 4         |  |
|   |         |              | 5         |  |
|   |         |              | 6         | 1  |
|   |         |              | 7         |  |
|   |         |              |           |  |
| 011-2   |         |              |           |  |
|   |         |              | 1         |  |
|   |         |              | 2         |  |
|   |         |              | 3         |  |
|   |         |              | -4        |  |
|   |         |              | 5         |  |
|   |         | 1            | 6         |  |
|   | ******* |              | 7         | ]  |
| 011-3   |         |              |           |  |
|   |         |              | 1         |  |
|   |         | 1            | 2         |  |
|   |         |              | :3        |  |
|   |         |              | 4         |  |
|   |         |              | 5         |  |
|   |         |              | 6         |  |
|   |         |              | 7         |  |
| 011-4   |         |              |           |  |
|   |         |              | 1         |  |
|   |         |              | 2         |  |
|   |         |              | 3         |  |
|   |         |              | 4         |  |
|   |         |              | 5         |  |
|   |         |              | 6         |  |
|   |         | *****        | 7         |  |

Attachment "H"

| Attachment | "I" |
|------------|-----|
|------------|-----|

## COUNCIL MONTHLY DEPARTMENT ACCOUNTABILITY REPORT

(To be submitted monthly by each Department Head) Month:\_\_\_\_\_, 20\_\_

Department/Program:\_\_\_\_\_

1. Goals/Objective Progress:

|                   | <br> |      |      |
|-------------------|------|------|------|
| in a serie series | <br> | <br> | <br> |
| -                 |      |      |      |
|                   |      |      | <br> |
| N                 | <br> | <br> |      |
|                   |      |      |      |
|                   |      |      |      |
|                   |      |      | <br> |

- --Reconciled: Yes/No
- --Within budget: Yes/No

#### 3. Number of Employees

2.

- --Full-Time Employees:\_\_\_\_\_
- --Part-time Employees:\_\_\_\_\_
- --Vacant Positions: \_\_\_\_\_
- --Temps Hired:\_\_\_\_\_How Long Ea.:

- 4. Required Program Reports:
  - --Monthly Completed: Yes/No
  - --Quarterly Completed: Yes/No
  - --Yearly Completed: Yes/No
- 5. New Proposals Due:
  - A. \_\_\_\_\_Due Date:\_\_\_\_\_ B. \_\_\_\_\_Due Date:\_\_\_\_\_
  - C. \_\_\_\_\_ Due Date:\_\_\_\_\_
- 6. List of things requested previous month by Council & progress on each:

7. Self-Assessment: Areas that Need improvement/expansion:

8. If audit findings, update on corrective actions:

Submitted this\_\_\_day of \_\_\_\_\_, 20\_.

Division Head Received:\_\_\_\_\_Date:\_\_\_\_\_ CAO Received:\_\_\_\_\_Date:\_\_\_\_\_

Department Director

