

Wyandotte Nation

8 Turtle Drive, Wyandotte, OK 74370

Wyandotte Nation Human Resources Employment Application

Name	Social Security #
Last First	Middle
AddressStreet	City State Zip Code
Telephone #()Mobile/Beeper/Other Phone #	()E-mail Address
Position(s) applied for	Date of application//
Referral Source (Please check the appropriate category and name the so	urce.) Tribal Enrollment
Walk-in	School
	Job Fair
Advertisement — D	Staffing Agency-
Company's Website	Government Employment Agency
□ Other Internet □	
If necessary, best time to call you at home isam/pm	Will you travel if job requires it?
May we contact you at work?□Yes □No	If they have been explained to you, are you able to meet attendance requirements of the position?DN/A DYes DNo
If yes , work number and best time to call ()am/pm	Will you work overtime if required?□Yes □No
If you are under 18 and it is required, can you furnish a work permit?□Yes □No	If no , please explain
If no , please explain	
Have you submitted an application here before?	Driver's license number required if driving may be required in the job which you are applying:
If yes , give date(s) and position(s)	State
	Have you ever been bonded?
Have you ever been employed here before?	Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.
Are you legally eligible for employment in this country?	Have you ever pled "guilty" or "no contest" to, or been convicted of, a crime?□Yes □No
Date available for work/////	If yes , please provide date(s) and details
What is your desired salary range or hourly rate of pay?	
\$ Per	
Type of employment desired:□Full-Time□Part-Time□Educational Co-Op□Seasonal□Temporar	
Will you relocate if job requires it?	

Equal access to programs, services and employment is available to all persons.

An Equal Opportunity Employer

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Starting with your most recent employer, provide the following information.

Employer	Telephone #		Ν	1onth	Year	Month	Year
			Dates employed_		/t	0	_/
Street address	City	State			Compensation (St	arting)	
			□ Hourly		Salary	\$	per
Starting job title/final job title			Commission/Bon		Compensation Compensation (En		per
Immediate supervisor and title (for most recent position held)	May we contact for referen	ce?	□ Hourly		Salary	1.	
	□ Yes □ No	□ Later	,		,	\$	per
Why did you leave?			Commission/Bon	us/Other	Compensation	\$	per
Summarize the type of work performed and job responsibilities.							
What did you like most about your position?							
What were the things you liked least about the position?							

Employer	Telephone #			Month	Year	Month	Year
Street address	City	State	Dates employed		/t Compensation (St	0 arting)	_/
Starting job title/final job title			□ Hourly		Salary	\$	per
5, , ,			Commission/Bo				per
Immediate supervisor and title (for most recent position held)	May we contact for reference	ce?			Compensation (En	ding) I	
	🗆 Yes 🗆 No	□ Later	□ Hourly		Salary	\$	per
Why did you leave?			Commission/Bo	nus/Other	Compensation	\$	per
Summarize the type of work performed and job responsibilities.							
What did you like most about your position?							
What were the things you liked least about the position?							

Employer	Telephone #		Month	Year	Month	Year
			 Dates employed	/	_to	_/
Street address	City	State		Compensation (S	Starting)	
			□ Hourly	□ Salary	\$	per
Starting job title/final job title			Commission/Bonus/O	•		per
Immediate supervisor and title (for most recent position held)	May we contact	for reference?	-	Compensation (E	inding)	
	□ Yes [⊐ No □ Later	Hourly	□ Salary	\$	per
Why did you leave?			Commission/Bonus/O	ther Compensation	\$	per
Summarize the type of work performed and job responsibilities.			_ L			
What did you like most about your position?						
What were the things you liked least about the position?						
	Telenheure #		Month	Year	Month	Year
Employer	Telephone #		Month	fear	Month	Iear
Street address	City	State	Dates employed	/ Compensation (S	to	/
Street address	city	Jiale		compensation (:	star ungj	

Street address	City	State	1	· ····[···]···		Compensation (St	tarting)	
			. 🗆	Hourly		Salary	\$	per
Starting job title/final job title			Comn	nission/Bonus		Compensation		per
Immediate supervisor and title (for most recent position held)	May we contact for ref]			Compensation (Er	L.	
	🗆 Yes 🗆 No			Hourly		Salary	\$	per
Why did you leave?			Comn	nission/Bonus	/Other	Compensation	\$	per
Summarize the type of work performed and job responsibilities.								
What did you like most about your position?								
What were the things you liked least about the position?								

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Employment history (continued)								
Explain any g	gaps in your employment, other than thos	se due to person	al illness, injury or disabilit	у				
Have you wo	lave you worked or attended school under any other name?							
	sed on previous page, have you ever bea ase explain					□Yes	□No	
Are you prese	ently employed?	DYes	□No Name of Co	ntact:				
		Skills a	nd Qualifications					
	ny special training, skills, licenses and/o equipment you can operate that relates					ou are appiying. A		
Computer SI	kills (Check appropriate boxes. Include softw	vare titles and years	s of experience.)					
	Word Processing	Year	rs: 🛛	Internet		Yea	rs:	
	Spreadsheet	Yea	rs: 🛛	Other		Yea	irs:	
	Presentation	Yea	rs: 🛛	Other		Yea	irs:	
	E-mail	Yea	rs: 🛛	Other		Yea	Irs:	
		Educati	ional Background					
Starting with	your most recent school attended, provid	de the following in	nformation.					
	School (include City & State)	Years Completed	Completed		GPA Class Rank	Major/Mino	r	
College or Ur	niversity:		Diploma Degree Certification Other					
Vocational or	Technical:		Diploma Degree Certification Other					
High School o	or GED:		Diploma Degree Certification Other	GED				

Other:

Diploma

Degree______

Certification______

Other______

References

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Title	Relationship to you	Telephone	Number of years known

Related Information

To what job-related organizations (professional, trade, civic, offices held, etc.) do you belong?
Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, Veteran/Reserve National Guard or any other
similarly protected status.

List special accomplishments, publications, awards, etc.

Exclude information that would reveal race,	color, religion, sex,	national origin,	citizenship, age	, mental or physical	disabilities,	Veteran/Reserve National	Guard or any other
similarly protected status.							

In your current or a prior job, have you ever written instructions or directions to be followed by employees or customers?

Yes	🗖 No	Not Applicable
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If yes, please explain:_

Is there any other job-related information you want us to know about you?

Please read each Applicant Statement before signing.

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct. I understand that any false information or omission may disqualify me from further consideration for employment and may result in dismissal if discovered at a later date.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer may request an investigative consumer report from a consumer reporting agency. This report may include information as to my character, reputation, personal characteristics and mode of living obtained from interviews with neighbors, friends, former employers, schools and other. I understand that I have the right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.

I authorize the investigation of any and all statements contained in this application. I also authorize whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that if I am extended an offer of employment, it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand that I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post employment drug screen as a condition of employment, if required.

I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and complete a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law.

I understand that this application or subsequent employment does not create a contract for employment nor guarantee employment for any specified period or definite duration. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without cause and with or without notice. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Chief, Second Chief or Chief of Staff.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will sufficiently cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT. I certify that I have read, fully understand, and by my signature consent to these statements.

Signature of Applicant		Date	/	/	
	(This application for employment will remain active for a limited time.)				