



Spokane Tribe of Indians

Attn: H. R. Department P.O. Box 206, Wellpinit, WA 99040
(509) 458-6583 Fax (509) 458-6556

CENTURY OF SURVIVAL
1881-1981

APPLICATION FOR EMPLOYMENT

The Spokane Tribe is an Equal Opportunity Employer, that also applies its **Tribal Preference Policy**

Position Applied For: _____ Vacancy#: _____

PERSONAL (Please Print)

Name: _____
Last First Middle

Address: _____
No. Street City State Zip

Telephone No. _____ Day Time Phone Number _____

Are you over 18 yrs of age? Yes No Is your license valid? _____ Expiration Date _____

Are you legally eligible for employment in the U.S.? Yes. No. (If hired, verification will be required by law)

TRIBAL AFFILIATION: Verification of Tribal affiliation is required

Are you a member of a federally recognized Tribe? Yes. No. (If yes, complete the following)

Name of Tribe: _____ Enrollment No.: _____

Spouse of Spokane Tribal Member: Yes. No. Child of Spokane Tribal Member: Yes. No.

Are you employed at the present time: Yes. No. Date available for work: _____

Have you worked for us before? _____ If yes, when? _____ Position: _____

EDUCATION Name & Location of School	Degree, Certification
High School	
College	
Other	
Special qualifications/skills/certification/training	

Additional information you would like considered: _____

Have you been convicted of a felony in the past 7 years? Yes. No. If yes, list convictions: _____

PRIOR EMPLOYMENT (Start with most recent or current employer, attach additional list if needed)

Employer:	Phone No:	Dates From:	To:
Address:		Position:	
Duties:		Supervisor:	
		Starting Salary:	
Reason for leaving:		Ending Salary:	
Employer:	Phone No:	Dates From:	To:
Address:		Position:	
Duties:		Supervisor:	
		Starting Salary:	
Reason For Leaving:		Ending Salary	
Employer:	Phone No:	Dates From:	To:
Address:		Position:	
Duties:		Supervisor:	
		Starting Salary:	
Reason For Leaving:		Ending Salary	

MILITARY SERVICE

Branch of Service	Dates From	To	Rank & Duties	Date Discharged

REFERENCES-TWO PERSONAL AND TWO PROFESSIONAL (Not related or previous employers)

Name	Address	Yrs. Known	Telephone No.
Personal			
Personal			
Professional			
Professional			

I certify under penalty of perjury the information I have provided is accurate and complete, to the best of my knowledge. If the Spokane Tribe of Indians employs me, I understand that any misrepresentation or false statement in the application will be cause to terminate my employment. I consent to contact of references I have listed, or any other sources, about my prior employment, criminal background or personal history. I release the Spokane Tribe from any claims arising from its reliance on information that it may obtain. I reserve the right to know the name and address of any investigative agency used to obtain a copy of any report provided to the Spokane Tribe of Indians.

I understand this application is not an employment contract. A pre-employment drug test and random drug testing after employment are mandatory. There is a mandatory 90-day orientation period on all positions. The Spokane Tribe may conduct a background investigation and require more information for certain positions.

Date _____ Applicant Signature _____
 (Signature Required)

IMPORTANT NOTICE

- A completed employment application is required.
- A separate application must be submitted for each position applied for. A resume and letters of recommendation may be included.
- To receive Indian Preference consideration, proof of tribal enrollment is required.
- An enrolled member of a federally recognized Tribe must provide a copy of his/her Tribal Enrollment Card.
- A direct descendent of the Spokane Tribe must provide a Certification of Indian Blood (CIB).
- A person seeking consideration as a spouse of a Spokane Tribal Member must provide proof of marriage.
- If the position requires a valid Washington Driver's License, you must provide a copy of your valid license.
- Proof of education is required for positions that require a college degree.

In order to receive consideration for any of the items listed above, documentation must be submitted with this application.