



Spokane Tribe of Indians

477 Youth Employment Program

Application



Spokane Site
 232 E Lyons Ave., Spokane, WA 99208
 Fax 509.533.0699 Ph. 509.533.1360

Wellpinit Site
 P.O. Box 358, Wellpinit, WA 99040
 Fax 509.458.8017 Ph. 509.458.8000

LOCATION:	Wellpinit:	Spokane:
APPLICANT STATUS:	New:	Returning:

Please print legibly or type. Answer all questions completely. Incomplete applications will not be processed.

PERSONAL INFORMATION
 Verification required refer to Documents Check List

Name as it appears on Social Security Card:

Last	First	Middle
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Mailing Address:

Address	City	State	Zip
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Physical Address:

Address	City	State	Zip
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Date of Birth: _____ Gender: Male Female Total # in Household _____

Social Security Number: _____ U.S. Citizen: Yes No

Home Phone #: _____ Cell Phone #: _____ Message Phone #: _____

Parent/Legal Guardian:

Name	Relationship	Phone #
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TRIBAL AFFILIATION
 Verification required refer to Documents Check List

Enrolled Member of a Federally Recognized Tribe: Yes No

Name of Tribe: _____ Enrollment #: _____

1st line descendant: Yes No Parent's Name: _____

Name of Tribe: _____ Parent's Enrollment #: _____

EDUCATION
 Verification required refer to Documents Check List

Name of School/College attending: _____

Address	City	State	Zip
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Phone #: _____ Current Grade Completed: _____

PRIOR EMPLOYMENT
Must be completed unless New Applicant

Employer Name: _____

Address	City	State	Zip
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Position: _____ Dates: _____ to _____

Supervisor: _____ Phone #: _____

Duties:

OTHER INFORMATION
Please complete the following

Do you have a valid Driver's license? Yes No

If not, are you 15½ or older? Yes No

Release of Information

The information provided is true and accurate to the best of my knowledge. Should I be employed by the Spokane Tribe, any misrepresentation or false statement contained herein may be considered cause for possible dismissal. I also hereby authorize the Employment & Training department staff to obtain or release information included in this application as it pertains to my eligibility for services, and/or reporting purposes.

Date _____ Applicant Signature _____
(Signature Required)

Date _____ Parent Signature _____
(Required if under 18 years of age)



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JOB ANNOUNCEMENT

TITLE: SUMMER YOUTH EMPLOYMENT
DEPARTMENT: 477-YOUTH EMPLOYMENT PROGRAM
STATUS: TEMPORARY 40 HOURS A WEEK
RATE OF PAY: TBD
OPENING DATE: APRIL 13th, 2021
CLOSING DATE: MAY 31st, 2021

Applications submitted after the Closing Date will not be eligible for employment.

The Spokane Tribe of Indians is now accepting applications for the 2021 Summer Youth Employment Program. For youth ranging between the ages of **14 to 19 years of age by the first day of employment and attending an educational program.**

5 Week Session ONLY: July 12th - August 13th, 2021 (200 hrs.)

Eligibility for Employment & Indian Preference:

- Applicants must be a member of a Federally recognized Tribe or a 1st line Descent of a **Federally Recognized Tribe** (excluding Kalispel Tribal Members due to funding restrictions)
- Applicants who are enrolled members of the Colville Tribe and reside within Stevens and Lincoln Counties must be a first-line descendant of another federally recognized tribe (excluding Kalispel) to be eligible for employment
- Applicants must reside in the 477/TANF service area.
- 19 year old applicants must be enrolled/attending an approved educational program
- Must have made satisfactory progress for school year 2020 - 2021
- ALL Applicants are subject to a pre-employment drug test
- Indian Preference as follows: 1.) TANF client 2.) Spokane Tribal Member 3.) 1st line descendent of a Spokane Tribal Member 4.) Member of other Federally Recognized Tribe 5.) 1st line descendent of another Tribe
- All 14 year olds and first year participants will be assigned to the Youth - Empowerment - Success (Y.E.S) team

Please use the attached check list to ensure all required documents are attached to application.

**APPLICATIONS CAN BE PICKED UP AND DROPPED OFF AT THE
WELLPINIT & SPOKANE SITES**

For More Information Contact the above Office Numbers



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DOCUMENTS CHECK LIST

Please use the check list to ensure all required documents are submitted with application on or before May 31st, 2021.

<i>NEW APPLICANT REQUIREMENTS</i>	
COMPLETE	REQUIRED DOCUMENT
	Completed Application
	Verification of Age (Official Birth Certificate)
	Proof of Tribal Enrollment (Tribal I.D. Card, Certificate of Indian Blood)
	Social Security Card (Copy or Proof of filing for replacement from Social Security & copy of card when received)
	Proof of Residence (Utility Bill – EX. Avista or telephone bill)
	Verification of Legal Guardianship (Court Documents or Power of Attorney)
	Verification of School Enrollment (ASB card, enrollment)
	Drug Test Consent Form (Attached to Application)
<i>RETURNING APPLICANT REQUIREMENTS</i>	
COMPLETE	REQUIRED DOCUMENT
	Completed Application
	Proof of Residence (Utility Bill – EX. Avista or telephone bill)
	Verification of Legal Guardianship (Court Documents or Power of Attorney)
	Verification of School Enrollment (ASB card, enrollment)
	Drug Test Consent Form (Attached to Application)

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