YAVAPAI-APACHE NATION HUMAN RESOURCES

phone (928) 567-1062

fax (928)567-1064



## **EMPLOYMENT APPLICATION**

I am applying for: List Position	Appli	cation Date:	
List Position	PERSONAL INF	OPMATION	
Name		ORMATION	
Name: Last Name	Full First Name		Full Middle Name
Mailing Address:			
Mailing Address:Street/P. O. Bo	ox City	State	Zip Code
Street Address:			
Street	City	State	Zip Code
Phone:	Cell:	Email:	
Are you an Enrolled Member of th	e Yavapai-Apache Nation?	Yes No	)
Are you an Enrolled Member of ar	other Tribe? Yes No	Tribal Affiliation:	
Are you a Veteran of the United St	ates Military? Yes No	o If yes, dates of Se	prvice
Do you have a Valid Driver Licens	se? Yes No		
Are you legally eligible to work in	the United States? Yes	No	-
If yes, is your right Permanent? Ye	esNo	Temporary? Yes	No
Social Security #		-	
Have you been convicted of a crim If yes, please describe fully, includ disqualify candidates. The date of	ling date, location and dispos	ition of the conviction. (Co	onvictions do not automatical

## **EDUCATION**

#### SCHOOL AND LOCATION

#### YEARS OR DATE COMPLETED

Name	City/State		Year(s)/Dipl	oma (yes/no)
Name	City/State		Year(s)/Deg	ree
Name	City/State		Year(s)/Deg	ree
			_	
Name	City/State		Year(s)/Dipl	oma (yes/no)
Name	City/State		Year(s)/Deg	ree
s or e				
Name	City/State		Year(s)/Deg	ree
Name	City/State		Year(s)/Deg	ree
foreign language? Yes	No			
		Fluent	Good	Fair
	REFERENCES			
the names of three (3) people not rel		-	wn for at least th	ree (3) years.
		<b>1</b>	1 1 \	
Mailing Address		(area code a	na number)	Relationship
Mailing Address		(area code an	nd number)	Relationship
	Name   Name   Name   Name   or   Name   Name   Name   foreign language?   Yes   the names of three (3) people not relevant to the name to t	Name       City/State         Name       City/State         Name       City/State         Name       City/State         Name       City/State         Name       City/State         Sort       City/State         Name       City/State         Sort       City/State         Sort       City/State         Sort       City/State         Name       City/State         Name       City/State         Name       City/State         Name       City/State         Mailing Address       Mailing Address	Name       City/State         Name       City/State         Name       City/State         Name       City/State         Name       City/State         Sor       City/State         Name       City/State         Name       City/State         Sor       Fluent         Name       City/State         Name       City/State         Name       City/State         Foreign language?       Yes	Name       City/State       Year(s)/Deg         Name       City/State       Year(s)/Dipl         Name       City/State       Year(s)/Deg         Independence       Fluent       Good         Mailing Address       (area code and number)       Mailing Address

Within the context and intent of Tribal, Indian and Veterans preference and position minimum requirements, the Nation will provide equal employment opportunity without regard to race, color, sex, age, disability, religion, national origin, marital status, ancestry, sexual orientation or political belief. Amended 05/23/2019 es

(area code and number)

Relationship

Mailing Address

Name



# **EMPLOYMENT HISTORY**

Beginning with your <u>most recent employer</u>, please list your employment history for the **past 10 years**. Attach additional pages if necessary.

1. Employer		Start Date	*End Date
Address	State	Starting Salary	Ending Salary
Job Title	Co	ntact Number	
		(are	a code and number)
Responsibilities			
Reason for Leaving			
* If currently employed, may we	contact your emplo	yer: Yes No	
2. Employer	Sta	rt Date	End Date
Address		Starting Salary	Ending Salary
Job Title		Contact Number(are	a code and number)
Responsibilities		Ň	,
Reason for Leaving			
3. Employer		Start Date	End Date
Address	Stata	Starting Salary	Ending Salary
Job Title			
500 The		Contact Number(are	a code and number)
Responsibilities			
Reason for Leaving			
<b>4.</b> Employer		Start Date	End Date
Address		Starting Salary	Ending Salary
City	State		
Job Title		Contact Number(are	a code and number)
Responsibilities			,
Reason for Leaving			

#### **IN CASE OF AN EMERGENCY, NOTIFY:**



NAME:	
ADDRESS:	

PHONE NUMBER ( ) \_\_\_\_\_\_ WORK PHONE NUMBER () \_\_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

# **DECLARATION AND RELEASE**

I, \_\_\_\_\_\_\_\_(print name), in consideration of employment with Yavapai-Apache Nation (YAN), hereby authorize YAN, to utilize, in part, in total and/or none, of the following indexes, including but limited to, background checks, reference checks, and/ or employment verifications on applicant. These checks may include, but are not limited to, information, data, discussions, records review, history verifications and/or, any and all other documents pertaining to applicant, directly and/or indirectly and may include, but is not limited to, discussions with present and/or former supervisors, coworkers, business associates, and/or other individuals, that YAN may, in its sole discretion, believe can offer, relevant, related information, including but not limited to, applicants suitability for employment, temperament and/or manifestations of judgment, integrity, character and/or the lack thereof. YAN may also verify information that applicant has provided on this "Employment Application" and/or accompanying "Resume" and/or, any and all "Other" documents submitted, or to be submitted, by applicant, to the Yavapai-Apache Nation.

I authorize the investigation, verification and/or interrogation and/or corroboration, regardless of form, of all my statements, contained herein, including the "references" applicant has provided to YAN. Further, applicant agrees to cooperate by providing, in a timely manner, any and/all information concerning any/all previous, current and/or concurrent employment, including salary and/or wage information, reason(s) for separation and/or any and all "other" information and/or data, provided to YAN, by and through the application process. Applicant, hereby authorizes the immediate release of any/all, including but not limited to, information, data, records, irrespective of form, that may directly and/or indirectly pertain and/or reference applicant, including but not limited to, any/all information, data, records, statements etc. the entity may possess and/or can access, and applicant releases all cooperating parties from any and all liability for any and all damage, that may or may not result from, including but not limited to, providing, making available, disclosing, referencing etc. to the Yavapai-Apache Nation.

I understand, **The Yavapai-Apache Nation (YAN) is an "At Will" employer**. I agree and understand, that if I become an employee of the YAN, my employment is "At Will" and therefore, has no definite period of time, and, that as an "At-Will" employer, the Nation may terminate and/or separate, an employee from employment, with The YAN at any time, with or without providing information, notice, cause and/or economic and/or any other business or non-business reasons. I agree and understand, that if I become an employee of the YAN, my employment is "At Will" and therefore, I (applicant/employee), including but not limited to, may depart, exit, leave, separate and/or not return to the YAN at any time, with or without providing information, notice, cause and/or economic and/or any other business or non-business reasons.

I understand and agree that if employed, if I have ever been convicted of a sexual offence in any jurisdiction that I may be required to register under Title 24: Yavapai-Apache Nation Sex Offender Registration and Notification Code.

I understand and agree that as a condition of my employment, I will be required to undergo a pre-employment drug screen and/or test, in accordance with the "<u>Yavapai-Apache Nation's Zero Tolerance Drug Free Workplace Policy</u>." I also

understand and agree, that, if employed by The YAN,, <u>I will be required</u> to comply with the Nation's policy of random drug testing.

#### **DECLARATION AND RELEASE: CONTINUED**

I also acknowledge that if the position with The YAN requires the operation of a motor vehicle, within the course and scope of my employment, I understand and agree that, I will be required to be insurable by the Nation's insurance carrier.

I hereby certify, that the information, data, references and, any/all other type or types of information contained in this application and/or accompanying documents, prepared and/or reviewed and/or under the control, of and by applicant, is true, correct, and complete, to the best of my knowledge, belief and understanding. Further, if applicant is employed or becomes employed at any time with the YAN; "False Statements" on this application, in total and/or in part, shall be grounds for immediate dismissal.

"Application" is defined to include any information that <u>accompanies</u> my "Employment Application," including but not limited to, my resume, credential(s) and/or other supporting documentation.

Signature

Date

Preference will be given to qualified applicants who are members of federally recognized Indian tribes. To be considered for Indian Preference you must submit your Certification of Indian Blood (CIB) with your application.

> Yavapai-Apache Nation Human Resources Department 2400 West Datsi Camp Verde, Arizona 86322 phone (928) 567-1062 fax (928) 567-1064