



Kootenai Tribe of Idaho

P.O. Box 1269
 100 Circle Drive
 Bonners Ferry, ID 83805
 Phone (208) 267-3519
 Fax (208) 267-2960

APPLICATION FOR EMPLOYMENT

Name _____
Last First Middle

Address _____
Number Street City State Zip

Telephone (_____) _____ Social Security Number _____

If under 18, can you furnish work permit? Yes No

Position applied for _____

Employment desired FULL-TIME PART-TIME TEMPORARY/SEASONAL

Date Available to Start: _____

Have you been employed here before? Yes No If so, provide dates: _____

Tribal Affiliation: _____

EDUCATIONAL BACKGROUND

List last three (3) schools attended, including trade or professional school, starting with last one.

SCHOOL	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE, DIPLOMA or CERTIFICATION

Skills and Qualifications. Summarize qualifications, foreign languages spoken or any other special skills acquired from employment or other experiences that may qualify you for this position: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

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DO YOU HAVE A DRIVER'S LICENSE? Yes No

Driver's license number _____ State of issue _____ Operator Commercial (CDL) Chauffeur

Expiration date _____

Have you had any accidents/moving violations during the past three years?

Describe: _____

WORK EXPERIENCE

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in the comments section below.

Employer: _____ Address: _____ _____ Phone number: _____	Dates Employed: _____ Hourly Rate/Salary: _____
Immediate Supervisor and Title: _____ Your Job Title: _____ Reason for leaving (be specific): _____ May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No List the jobs held, duties performed, skills used or learned, advancements or promotions while at this company: _____ _____ _____	

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Immediate Supervisor and Title: _____ Your Job Title: _____ Reason for leaving (be specific): _____ May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No List the jobs held, duties performed, skills used or learned, advancements or promotions while at this company: _____ _____ _____	

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Employer: _____ Address: _____ _____ Phone number: _____	Dates Employed: _____ Hourly Rate/Salary: _____
Immediate Supervisor and Title: _____ Your Job Title: _____ Reason for leaving (be specific): _____ May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No List the jobs held, duties performed, skills used or learned, advancements or promotions while at this company: _____ _____ _____	

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Immediate Supervisor and Title: _____ Your Job Title: _____ Reason for leaving (be specific): _____ May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No List the jobs held, duties performed, skills used or learned, advancements or promotions while at this company: _____ _____ _____	

REFERENCES

List name and contact information of three (3) 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	Telephone	Years Known

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information you would like us to consider:

**PLEASE READ CAREFULLY:
KOOTENAI TRIBE OF IDAHO PRIVACY ACT NOTICE**

In compliance with the Kootenai Tribe of Idaho Privacy Act and the Privacy Act of 1974, the following information is provided:

The Kootenai Tribe of Idaho respects the privacy of applicants for employment with the Tribe. This Privacy Notice sets forth how the Tribe will use the information it obtains from employment applications.

The purpose of the requested information is to determine the eligibility of individuals for employment with the Tribe. The information will be used by the Kootenai Tribe of Idaho and staff who have need for the information in the performance of their official duties. The information may be disclosed to appropriate Tribal, Federal, State, local, or foreign law enforcement and regulatory agencies when relevant to civil, criminal or regulatory investigations or prosecutions or when pursuant to a requirement by the Tribe or any lawful purpose.

The Tribe relies on the applicant to provide accurate and up-to-date information regarding the position(s) applied for. To the extent appropriate in accordance with applicable law, the Tribe may seek additional data and/or verify your information by contacting your references and other reputable third parties.

Application information from applicants who are not hired, may be retained and used for up to 5 years so applicants may be considered later if a suitable position becomes available. Failure to consent to the disclosures indicated in this notice will result in the Tribe being unable to process your application for employment.

The disclosure of your Social Security Number (SSN) is voluntary. However, failure to supply a SSN may result in errors in processing your application.

False Statement Notice

A false statement on any part of your application may be grounds for the Tribe to choose not to employ you or to terminate employment after you begin work. Also, you may be punished by fine or imprisonment (Kootenai Law & Order Code, Section 4-19; U.S.C., Title 18, Section 1001).

Consent to jurisdiction.

Any person who applies for any license or employment, enters into any contract or agreement with the Kootenai Tribe of Idaho, or Kootenai Tribal entity shall be deemed to consent to the civil jurisdiction of the Tribe and the Tribal Court.

EQUAL EMPLOYMENT POLICY / INDIAN PREFERENCE

The Kootenai Tribe of Idaho does not discriminate because of religion, race, creed, age, sex, sexual preference, ancestry, color, national origin, marital status, or physical handicaps, in its procedures for employment, upgrading, demotion, lateral assignment transfer, recruitment, layoff, termination, compensation, training, or other benefits. All personnel policies, procedures and actions shall be in accord with the provisions of the Law & Order Code of the Kootenai Tribe of Idaho and applicable federal law.

Tribal preference or Indian preference shall be observed in accordance with Chapter 19, Tribal Employment Rights.

DRUG FREE WORKPLACE:

The Kootenai Tribe of Idaho has adopted an alcohol and drug-free workplace policy. The use, sale, or possession of alcohol or drugs in the course of employment is prohibited. Reporting to work while under the influence of alcohol or drugs is forbidden.

Accordingly, drug testing shall be conducted for applicants recommended for hire. By signing this application you are agreeing to undergo pre-employment drug-screening.

CRIMINAL BACKGROUND CHECK:

Individuals who come into contact with children, transport or enter homes of the elderly, come into contact with individuals with disabilities in need of support, or who are employed in the Tribal Accounting Department as part of their regular job duties are subject to a criminal background check prior to beginning employment. If you are applying for such a position, you consent to a criminal background check.

E-VERIFY:

E-Verify is a program conducted by the United States government that compares information from your Employment Eligibility Verification Form I-9 to data from U.S. government records. If the information matches, it confirms you are eligible to work in the United States. Kootenai Tribe of Idaho employees must be EVerified to be eligible for employment.

Signature of Applicant _____ **Date** _____