



**HOOPA VALLEY TRIBE**  
BOARD, COMMITTEE, COMMISSION APPLICATION

Name of Board, Committee, Commission: \_\_\_\_\_

The purpose of this form is to obtain general information from applicants, concerning interest and qualifications which will assist the Tribal Council in making board, committee & commission appointments. Resume or other data may be attached to this form.

NAME: \_\_\_\_\_ SS # \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

\_\_\_\_\_ WORK PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

List volunteer activities or educational background which may be relevant to the vacancy applying for.

Date: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you an enrolled Hupa Tribal Member?  Yes  No

Briefly tell us why you are interested in serving on this committee, Commission, or board: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you currently serving on any other board, committee or commission?  No  Yes

List \_\_\_\_\_

\_\_\_\_\_

Are there any family members currently serving on this committee, board or commission?  yes  No

List family member and relationship: \_\_\_\_\_

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Applicants signature \_\_\_\_\_ date \_\_\_\_\_

Note: a person is limited to serving on only two committees, commissions or boards at one time. Tribe's Alcohol & Drug Policy applies. The Referendum on Conflict of Interest and Nepotism applies. Return completed form to the Tribe's Personnel Dept., or mail to: Hoopa Valley Tribe, P.O. Box 1348, Hoopa, CA.95546.

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