

# HOOPA VALLEY TRIBE

## HUMAN RESOURCES

P.O. BOX 218 HOOPA, CALIFORNIA 95546

PHONE NUMBER (530) 625-9200 FAX (530) 625-4269



POSITION APPLIED FOR \_\_\_\_\_

DATE \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

SALARY DESIRED \_\_\_\_\_

Is the position you are applying for in the Child Care Field? If yes, please complete the supplemental Questionnaire. If no, skip to next section.

Yes  No

Name Last First Middle Social Security Number

Present Mailing Address P.O. Box City State Zip Phone Number

**In Case of Emergency Notify**

Have you ever applied for work With the Hoopa Valley Tribe before? Yes  No  If Yes, Give Dates and Departments

Are You Under 18? Yes  No  Is Indian Preference Requested? Yes  No  Date Available for Employment Attach Copy of Membership Card No

**Past Employment History**

PLEASE LIST YOUR EMPLOYERS, STARTING WITH YOUR MOST RECENT POSITION  
CONTINUE ON SEPARATE SHEET IF NECESSARY-ATTACH RESUME IF REQUIRED

From	NAME AND ADDRESS OF COMPANY	TELEPHONE
Month Year	PRIMARY DUTY PERFORMED	
To	IMMEDIATE SUPERVISOR	REASON FOR LEAVING
Month Year		
From	NAME AND ADDRESS OF COMPANY	TELEPHONE
Month Year	PRIMARY DUTY PERFORMED	
To	IMMEDIATE SUPERVISOR	REASON FOR LEAVING
Month Year		
From	NAME AND ADDRESS OF COMPANY	TELEPHONE
Month Year	PRIMARY DUTY PERFORMED	
To	IMMEDIATE SUPERVISOR	REASON FOR LEAVING
Month Year		

**LIST THREE REFERENCES**

NAME	COMPANY NAME	MAILING ADDRESS	TELEPHONE AREA CODE ( )	YEARS KNOWN
TITLE/POSITION	TYPE OF BUSINESS		NUMBER	
NAME	COMPANY NAME	MAILING ADDRESS	TELEPHONE AREA CODE ( )	YEARS KNOWN
TITLE/POSITION	TYPE OF BUSINESS		NUMBER	
NAME	COMPANY NAME	MAILING ADDRESS	TELEPHONE AREA CODE ( )	YEARS KNOWN
TITLE/POSITION	TYPE OF BUSINESS		NUMBER	

Please Indicate Your Education and Training Background

KIND OF SCHOOL	NAME OF SCHOOL	LOCATION	DATE STARTED	DATE LEFT	DATE GRADUATED	COURSES TAKEN
HIGH SCHOOL						
COLLEGE						
OTHER TRAINING						

Are there other Experiences, Skills or Qualifications, which you feel would especially suit you for work with the Hoopa Valley Tribe?


VALID CA DRIVERS LICENSE	<input type="checkbox"/> YES <input type="checkbox"/> NO	LICENSE #		LIST ENDORSEMENTS
CLASS	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	OTHER	STATE	
LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.	<input type="checkbox"/> YES <input type="checkbox"/> NO	WILL ACCEPT	<input type="checkbox"/> FULL-TIME <input type="checkbox"/> REGULAR EMPLOYMENT	<input type="checkbox"/> PART-TIME <input type="checkbox"/> TEMPORARY EMPLOYMENT

**PLEASE READ THIS CAREFULLY BEFORE SIGNING.**

Your application will be given every consideration, but our receipt of it does not guarantee that you will be employed. Indian preference will be given consistent with the Tribal TERO Ordinance and the Indian Self Determination, Education and Assistance Act. The Hoopa Valley Tribal Council is an equal employment opportunity employer and considers all applicants on the basis of job qualification and without regard to race, color religions, sex, national origin, age, disability or genetics.

I certify that all statements made by me on this application are true, complete and correct to the best of my knowledge. I hereby grant permission to the Hoopa Valley Tribal Council and its personnel to confirm by personal inquiry or otherwise, the information I have given in the employment process. I understand that any willful misrepresentation of facts given in this process is grounds for rejection of the application or dismissal of employed. I release all persons connected with any requests for information from all claims, liability, and damages for whatever reason arising out of furnishing the information. I understand that if hired, such employment is conditioned upon a favorable pre-employment evaluation.

**I hereby acknowledge that I have read and understand the above statement.**

**We appreciate your interest and the time you have taken to prepare this application. Thank You.**

Applicants Signature

Date

DO NOT WRITE BELOW THIS LINE

DATE OF INTERVIEW	ATTENDED INTERVIEW	EXCUSED ABSENCE
	YES NO	YES NO
	YES NO	YES NO
	YES NO	YES NO