



Fort Mojave Indian Tribe

Human Resources Department

500 Merriman Avenue Needles, CA 92363
 Phone (760) 629-6147 Fax (760) 629-2322

APPLICATION FOR EMPLOYMENT

REMINDER: ALL APPLICATIONS MUST BE COMPLETED FOR EACH POSITION DESIRED AND MUST BE COMPLETELY FILLED OUT OR THE APPLICATION WILL NOT BE PROCESSED.

P E R S O N A L	Last Name		First	Middle	Date
	Street Address				Cell Phone
	City, State, Zip				Email Address
	Position Desired: <i>(One application per position, "Open" will not be accepted)</i>				Do you have a valid Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Have You Read the Job Description for the Position You Are Applying For? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If not, please do not hesitate to ask HR for Full Job Description if it applies)</i>				What date will you be available to begin work?
	Are you claiming Fort Mojave Indian Tribe Preference? <input type="checkbox"/> Yes <input type="checkbox"/> No FMIT Enrollment Number _____				Are you available for full time work? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you related to anyone who works for Fort Mojave Indian Tribe? <input type="checkbox"/> Yes <input type="checkbox"/> No Name: _____ Department _____				Are you available for Part time work? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Have you ever worked for the FMIT or its entities? <input type="checkbox"/> Yes <input type="checkbox"/> No				Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Have you been terminated from the FMIT or its Entities? <input type="checkbox"/> Yes <input type="checkbox"/> No				
	Are you legally eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				

E D U C A T I O N		Name and Location	Course of Study	Graduated	Years Completed?	Degree, Diploma, Certificate
	High School Or GED			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	College			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Business or Trade School			<input type="checkbox"/> Yes <input type="checkbox"/> No		

Please include Education Transcripts

EMPLOYMENT HISTORY

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status. Please fill out job duties as detailed as possible.

May we contact your past employers listed below? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer		Dates Employed		Job Duties:
		From	To	
Address				
Telephone:		Hourly/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Dates Employed		Job Duties:
		From	To	
Address				
Telephone:		Hourly/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Dates Employed		Job Duties:
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Employer		Dates Employed		Job Duties:
		From	To	
Address				
Telephone:		Hourly/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

FMIT Application, Continued

Applicant's Name: _____

Please include professional and personal references. This does not include relatives. *This Application will **NOT** be accepted if all **four (4)** references are not completed.

Name	Address	Phone Number	Relationship
*1.			
*2.			
*3.			
*4.			

List other skills (typing, computer, etc.)
List professional, trade, business or civic activities and offices held. (Exclude those which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.)
Have you ever been convicted or plead "no contest" to a felony, misdemeanor or other criminal offense in any Tribal, State, Federal or other court, including but not limited to the Fort Mojave Tribal Court, for which the records of such conviction or plea have not been expunged or sealed by the court? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," describe in full.

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

Signature of Applicant

Date