



APPLICATION FOR EMPLOYMENT
Affirmative Action/Equal Opportunity Employer

PERSONAL INFORMATION

DATE: _____ POSITION APPLIED FOR: _____

FULL NAME: _____
First Middle Last

ADDRESS: _____
Street Address Apt/Suite
City State Zip Code

E-MAIL: _____ PHONE: _____

EMPLOYMENT DESIRED: FULL-TIME PART-TIME DATE AVAILABLE: _____

Do you claim Indian preference? YES NO (If yes, please attach copy of Tribal Certification)

Do you claim Veteran's preference? YES NO (If yes, please attach copy of form DD214)

EMPLOYMENT ELIGIBILITY

ARE YOU A U.S. CITIZEN? YES NO* DO YOU HAVE A VALID DRIVER'S LICENSE? YES NO

*IF NO, ARE YOU ALLOWED TO WORK IN THE U.S.? YES NO

HAVE YOU EVER WORKED FOR THE PIERRE INDIAN LEARNING CENTER? YES* NO

*IF YES, WRITE THE START AND END DATES: _____

DO YOU HAVE A HIGH SCHOOL/GED DIPLOMA? YES NO- To be eligible for employment you must possess a high school diploma or GED

The Department of Transportation's (DOT's) Procedural regulation, 49 CFR part 40, § 40.25(j), requires an employer to ask: Have you previously had a verified positive pre-employment drug test, or refused to submit to a pre-employment drug or alcohol test administered by a DOT employer to which you applied and did not obtain employment?

NO - If no, sign below.

YES - If yes, did you complete the DOT return-to-duty procedures described in 49 CFR part 40, Subpart O, including the initial/follow-up evaluation with a qualified Substance Abuse Professional (SAP), education and treatment, return-to-duty and follow-up testing? Please indicate your response and explanation below:

YES; please explain: _____

NO; please explain: _____

(Print Name)

(Signature)

(Date)

EDUCATION

HIGH SCHOOL: _____ CITY / STATE: _____

FROM: _____ TO: _____

GRADUATE? YES NO YEAR: _____

COLLEGE: _____ CITY / STATE: _____

FROM: _____ TO: _____

GRADUATE? YES NO DEGREE: _____ YEAR: _____

OTHER: _____ CITY / STATE: _____

FROM: _____ TO: _____

DEGREE/CERTIFICATION: _____

OTHER: _____ CITY / STATE: _____

FROM: _____ TO: _____

DEGREE/CERTIFICATION: _____

PREVIOUS EMPLOYMENT

Begin with present job and work backwards, list all employers for the last 5 years. The 5-year period must be accounted for without breaks. For periods of unemployment, list dates and "unemployed" or "attending school." Attach additional sheets if needed.

May we contact your present employer? YES NO

EMPLOYER 1: _____
Company / Individual

SUPERVISOR'S NAME: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

_____ City State Zip Code

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

EMPLOYER 2: _____
Company / Individual

SUPERVISOR'S NAME: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

_____ City State Zip Code

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

EMPLOYER 3: _____
Company / Individual

SUPERVISOR'S NAME: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

_____ City State Zip Code

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

EMPLOYMENT REFERENCES

FULL NAME: _____ **RELATIONSHIP:** _____
First Last

E-MAIL: _____ PHONE: _____

FULL NAME: _____ **RELATIONSHIP:** _____
First Last

E-MAIL: _____ PHONE: _____

FULL NAME: _____ **RELATIONSHIP:** _____
First Last

E-MAIL: _____ PHONE: _____

AUTHORIZATION

Applicant understands that the PIERRE INDIAN LEARNING CENTER is an Affirmative Action/ Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed for it to be considered.

Please complete each section EVEN IF you decide to attach a resume.

I authorize the PIERRE INDIAN LEARNING CENTER to make any investigation of my personal, educational or employment history. I further authorize any current or former employer, person, firm, corporation, educational or government agency to provide the PIERRE INDIAN LEARNING CENTER with information they have regarding me. I hereby release the PIERRE INDIAN LEARNING CENTER and those who provide this information from any and all liability as a result of furnishing and receiving this information.

I certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated. Employment is contingent on completion of satisfactory pre employment drug screen and criminal background check.

SIGNATURE _____

DATE _____

PRINT NAME _____

**Applicant Screening Questionnaire
Indian Children Protection Requirements**

Name: _____ Social Security Number: _____
(Please print)

Job Title: _____ Announcement No: _____

Notification Requirements

Section 231 of the Crime Control Act of 1990, Public Law 101-647 (codified in 42 United States Code § 13041), requires that employment applications for Federal child care positions have applicants sign a receipt of notice that a criminal record check will be conducted as a condition of employment. Further, it is required to ask the following:

Have you ever been arrested for or charged with a crime involving a child?

- Yes [If "yes," provide the date, explanation of the violation, disposition of the arrest(s) or charge(s), place of occurrence, and the name and address of the police department or court involved.]
- No

Section 408 of the Miscellaneous Indian Legislation, Public Law 101-630 (codified in 25 United States Code § 3207), requires a criminal history records check as a condition of employment for positions in the Department of Interior that involve regular contact with or control over Indian children. Further, it is required to ask the following:

Have you ever been arrested, found guilty of, or entered a plea of nolo contendere (no contest) or guilty to, any felonious offense, or any of two or more misdemeanor offenses under Federal, State, or tribal law involving crimes of violence; sexual assault, molestation, exploitation, contact or prostitution; crimes against persons; or offenses committed against children?

- Yes [If "yes," provide the date, explanation of the violation, disposition of the arrest(s) or charge(s), place of occurrence, and the name and address of the police department or court involved.]
- No

I certify that my response to the above questions is made under Federal penalty of perjury, which is punishable by fine or imprisonment, and that I have received notice that a criminal history records check will be conducted and is a condition of employment. I understand my right to obtain a copy of any criminal history report made available to the Bureau of Indian Education and my rights to challenge the accuracy and completeness of any information contained in the report.

Applicant's Signature

Date