

# APPLICATION FOR EMERGENCY HIRE EMPLOYMENT

**(\*\*Your application will remain on file for six (6) months only. \*\*)**

Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_  
Last First Middle

Message #: (\_\_\_\_) \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_  
Street or P.O. Box City State Zip

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Are you enrolled in the CS & K Tribes? Yes \_\_\_ No \_\_\_ IF YES, give enrollment # \_\_\_\_\_

Are you enrolled in a federally recognized tribe? Yes \_\_\_ No \_\_\_ IF YES, provide a copy of your Tribal I.D. for documentation when completing this form.

**HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR?** Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please explain the offense(s), the date(s) committed and penalties/fines imposed: \_\_\_\_\_

**HAVE YOU EVER BEEN CONVICTED OF A FELONY?** Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please explain the offense(s), the date(s) committed and penalties/fines imposed: \_\_\_\_\_

**DO YOU POSSESS A VALID DRIVER'S LICENSE?** Yes \_\_\_\_\_ No \_\_\_\_\_  
If No, is there anything that may prevent you from being eligible for a license? Yes \_\_\_\_\_ No \_\_\_\_\_  
If YES, please explain: \_\_\_\_\_

**\*\*Due to the amount of applications on file for emergency hire, the Personnel Department will be starting a three strike policy. If our office calls you for an opening and we are unable to reach you three times, or you deny any job three times, your application will be removed. If you are hired on emergency hire, currently working or your telephone numbers are no longer valid your application will also be removed, and you will be required to re-apply.\*\***

**EMPLOYMENT PREFERENCE (Circle only ONE chosen preference).**

Cook	Education/Teacher Aide	Secretarial/Clerical
Counselor	Home Health/Caregiver	Shiftworker
Driver	Laborer	

**LOCATION MOST CONVENIENT FOR YOU:** \_\_\_\_\_  
Example: (Elmo, Polson, etc.)

**CAN YOU WORK EVENINGS?** \_\_\_\_\_ **CAN YOU WORK WEEKENDS?** \_\_\_\_\_

# INFORMATION SHEET

**PLEASE CHECK  EACH QUALIFICATION OR EXPERIENCE THAT APPLIES TO YOU:**

WORD PROCESSING  
 SPREADSHEETS

DATABASE  
 PERSONAL COMPUTER

ACCOUNTING  
 TYPING \_\_\_\_ WPM  
 WRITING SKILLS

BOOKKEEPING  
 10-KEY  
 COMMUNICATION SKILLS

SUPERVISION

POWER HAND TOOLS  
 CHAINSAW OPERATION

HAND TOOLS  
 HEAVY EQUIPMENT OPERATOR

FIRST AID CARD

CPR CARD

COMMERCIAL LICENSE

OTHER INFORMATION THAT WOULD BE HELPFUL TO YOUR APPLICATION,  
PLEASE BE SPECIFIC: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I am signing this emergency hire application with the knowledge that I understand and agree to the emergency hiring policies stated on this application.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date Signed**

***OFFICE USE ONLY***

Date/Time Called (#1)

Date/Time Called (#2)

Date/Time Called(#3)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_