

**CONFEDERATED SALISH & KOOTENAI TRIBES
INDIAN PREFERENCE OFFICE
CONSTRUCTION/FORESTRY APPLICATION**

Personal Background

Name: _____

E-Mail Address: _____

Address: _____ City/State/Zip: _____

Phone Number: _____ Message Number: _____ Date of Birth: _____

Are you an enrolled member of the Salish & Kootenai Tribes: _____ UO# _____

Are you an enrolled member of different Federally Recognized Tribe: Yes _____ No _____

Tribal Enrollment # _____ **(Please provide enrollment verification.)**

Have you ever been convicted of a misdemeanor in last 3 years: 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: _____

Driver's License Information

Do you have a valid Driver's License: Yes _____ No _____ Driver's License # _____

Expiration Date: _____ State of Issue: _____

Regular: _____ Commercial: _____ Class Type: _____ Endorsements: _____

(Please provide a copy of your Driver's License with application.)

Education and Training

High School: _____ Did you graduate: Yes _____ No _____

Have you obtained your GED: Yes _____ No _____ Year obtained: _____

College Attended: _____ Years Attended: _____ Diploma/Certificate _____

Are you an experienced sawyer: Yes _____ No _____ CPR / First Aid Card: Yes _____ No _____

Are you a certified flagger: Yes _____ No _____ Year certification obtained: _____

(Please provide a copy of your flagger card with application.)

Vocational or Technical Training: _____

Employment Data

List Job Skills:

1. _____ 2. _____ 3. _____

Do you have transportation: Yes _____ No _____ Will you relocate: Yes _____ No _____

Would you be willing to travel with Contractor _____

Do you own tools of trade: Yes _____ No _____ (carpenter)

Are you presently employed: Yes _____ No _____ If yes, by whom: _____

Job title: _____ Employers address: _____

WORK HISTORY

List your last three (3) employers, starting with the MOST RECENT:

Name of Employer: _____ Phone#: _____

Address: _____ Supervisor: _____

Employed From: _____ To: _____ Job Title: _____

Duties: _____

Reasons for Leaving: _____

Name of Employer: _____ Phone#: _____

Address: _____ Supervisor: _____

Employed From: _____ To: _____ Job Title: _____

Duties: _____

Reasons for Leaving: _____

Name of Employer: _____ Phone#: _____

Address: _____ Supervisor: _____

Employed From: _____ To: _____ Job Title: _____

Duties: _____

Reasons for Leaving: _____

List your knowledge, skills, and abilities that you feel would qualify you for the position(s) you are applying for: _____

REFERENCES

Only job-related references; no personal references.

1. Name: _____ Phone#: _____
Company Name: _____ Position: _____

2. Name: _____ Phone#: _____
Company Name: _____ Position: _____

3. Name: _____ Phone#: _____
Company Name: _____ Position: _____

CERTIFICATION: I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed no matter when discovered by the company. I hereby certify that I understand the instructions on this application, and that I have read, or had someone read, the above questions, and that I understand the questions asked and information requested.

Signature of applicant

Date