****

San Carlos Apache College Human Resource Department

1 San Carlos Avenue, Building 3

Tel (928) 475-2016, Fax (928) 475-2018

PO Box 344, San Carlos, AZ 85550

**APPLICATION FOR EMPLOYMENT**

The position you are applying for\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

Last First Middle

Address

P.O. Box/Street City State Zip

Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you enrolled in the San Carlos Apache Tribe: Yes\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_ Enrollment No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, attach the documentation

Are you enrolled in another federally recognized tribe? Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_ Enrollment No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If yes, attach the documentation

Do you have a valid driver’s license: Yes\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_ if not, is there anything that may prevent you from being eligible for a driver’s license: yes\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_ If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Driver’s license number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Driver’s License State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, attach the documentation

How did you learn of this position opening?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please complete the application, even if supporting documentation is attached/included.**

Are you eligible to work in the United States? (Proof of eligibility will be required if hired.)

Have you ever been convicted of a crime other than a minor traffic offense?

If yes, please give details. A conviction will not necessarily disqualify an applicant from the position sought.

Has San Carlos Apache College employed you before?

If yes, when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do any of your family members currently work for San Carlos Apache College? Yes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, who?

(Family members: Spouse; Child; Grandchild; Parent; Grandparent; Brother or sister, whole or half blood, and their spouses; Spouse’s parents, siblings, and children)

Do you have any experience, knowledge, skills, abilities, or qualifications that would especially fit you for work with San Carlos Apache College in the position you applied?

Record of Education

Do you have a high school diploma or the equivalent?

Please list any post-secondary education or equivalent courses of study pursued:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| School | Name and Address of School | Course of Study | Check Last Year  Completed | | Did You Graduate? | List  Diploma or Degree |
| College |  |  | 1 2 3 4 | | Yes No |  |
| College |  |  | 1 2 3 4 | | Yes No |  |
| College |  |  | 1 2 3 4 | | Yes No |  |
| Other |  |  | 1 2 3 4 | | Yes No |  |
|  |  |
|  |

attach documentation

List below all present and past employment, beginning with current or most recent employment:

Name and address of company, and type of business

Phone

Name

of Supervisor

From:

To:

Mo./Yr.

Mo./Yr.

Monthly

Salary

Reason for

leaving

Beginning

Ending

Describe in detail the work you did including major responsibilities of your position:

Name and address of company, and type of business

Phone

Name

of Supervisor

From:

To:

Mo./Yr.

Mo./Yr.

Monthly

Salary

Reason for

leaving

Beginning

Ending

Describe in detail the work you did including major responsibilities of your position:

Name and address of company, and type of business

Phone

Name

of

Supervisor

From:

To:

Mo./Yr.

Mo./Yr.

Monthly

Salary

Reason for

leaving

Beginning

Ending

Describe in detail the work you did including major responsibilities of your position:

**May we contact your present employer/supervisor?**

**May we contact your previous employers/supervisors?**

Professional/Employment References – Other than those listed above

|  |  |  |
| --- | --- | --- |
| Name and Occupation | Address | Telephone Number |
|  |  |  |
|  |  |  |
|  |  |  |

**I certify that the information provided in this application is accurate and complete to the best of my knowledge. I authorize an investigation into all information contained in and statements I have made on this application as may be necessary for reaching an employment decision. I also understand that should an employment offer be extended to me and accepted, and I will fully adhere to the policies and regulations of San Carlos Apache College. I further understand that any employment offered is ‘at will’ as contracted and nothing said or done during the application or interview process shall be deemed to constitute an implied employment contract. Incomplete applications will not be considered.**

It is against the College’s policy for any employee to unlawfully discriminate against an applicant for employment or another employee based on race, ethnicity, color, creed, religion, sex, age (40 and over), marital status, sexual orientation, national origin, veteran status, disability or any other classification protected by applicable discrimination laws.

EEO/San Carlos Apache/Veteran Preference

Applicant Signature Date