



BAHASTL'AH CHAPTER EMPLOYMENT APPLICATION

ALL SECTIONS MUST BE COMPLETED AND DOCUMENTATION MUST BE
ATTACHED TO APPLICATION TO BE CONSIDERED FOR EMPLOYMENT

PERSONAL INFORMATION

NAME: First, Middle, Last		MAILING ADDRESS		TELEPHONE NUMBER	
SOCIAL SECURITY NUMBER:		CENSUS NUMBER:		DATE OF BIRTH:	
CELL PHONE NUMBER		GENDER: MALE FEMALE		CIRCLE ONE: SINGLE MARRIED OTHER: _____	
DRIVER'S LICENSE NO. / STATE:		REGISTERED VOTER? YES NO NOT YET			

EMPLOYMENT DESIRED

POSITION TITLE:	DATE AVAILABLE FOR WORK:	HOURLY WAGE DESIRED:
AUTOMATED MACHINE SKILLS:	DO YOU HAVE RELIABLE TRANSPORTATION?	ARE YOU EMPLOYED NOW?

EDUCATION

SCHOOL NAME & LOCATION	YEARS ATTENDED	DATE GRADUATED	SUBJECTS STUDIED	CERTIFICATE/DEGREE
HIGH SCHOOL:				
COLLEGE OR UNIVERSITY:				
GED:				
TRADE, BUSINESS, OR VOCATIONAL:				

OTHER TRAINING, CERTIFICATES, AND JOB EXPERIENCE

MILITARY: PLEASE SUBMIT A DD-214

SERVICE BRANCH:	ENTRANCE DATE:
DISCHARGE DATE:	CLASSIFICATION DATE:

REFERENCES

Name	Title	Address or Current Phone Number	Years Acquainted
1.			
2.			
3.			

FORMER EMPLOYER(S):

<u>DATES OF EMPLOYMENT</u> FROM: TO:	<u>NAME & ADDRESS OF EMPLOYER:</u>	<u>POSITION:</u>	<u>DESCRIPTION OF DUTIES:</u>
RATE OF PAY:	REASON FOR LEAVING:		
<u>DATES OF EMPLOYMENT</u> FROM: TO:	<u>NAME & ADDRESS OF EMPLOYER:</u>	<u>POSITION:</u>	<u>DESCRIPTION OF DUTIES:</u>
RATE OF PAY:	REASON FOR LEAVING:		
<u>DATES OF EMPLOYMENT</u> FROM: TO:	<u>NAME & ADDRESS OF EMPLOYER:</u>	<u>POSITION:</u>	<u>DESCRIPTION OF DUTIES:</u>
RATE OF PAY:	REASON FOR LEAVING:		
<u>DATES OF EMPLOYMENT</u> FROM: TO:	<u>NAME & ADDRESS OF EMPLOYER:</u>	<u>POSITION:</u>	<u>DESCRIPTION OF DUTIES:</u>
RATE OF PAY:	REASON FOR LEAVING:		

FILL OUT THE FOLLOWING INFORMATION IF YOU HAVE BEEN EMPLOYED BY BAHASTL'AH CHAPTER BEFORE:

<u>DATES OF EMPLOYMENT</u> FROM: TO:	<u>NAME OF SUPERVISOR</u>	<u>POSITION:</u>	<u>DESCRIPTION OF DUTIES:</u>
RATE OF PAY:	REASON FOR LEAVING:		

EMERGENCY CONTACTS

NAME:	RELATION:	PHONE:
ADDRESS:		PHONE:
NAME:	RELATION:	PHONE:
ADDRESS:		PHONE:

The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, or any other materials used in the application process, or information offered during any interviews, can be justification for refusal of employment, or if employed, termination from employment with the Bahastl'ah Chapter. My signature below authorizes Bahastl'ah Chapter administration to contact any of my prior employers for reference purposes. Any and all information of concern as to my record, I release employers and persons named in my application from all liability for any damages on account of his/her furnishing said information.

Applicant Signature

Date

~ REQUIRED ~

SUBMIT COPIES OF CERTIFICATE OF INDIAN BLOOD, SOCIAL SECURITY CARD, AND DRIVER'S LICENSE OR IDENTIFICATION CARD, DIPLOMA(S), AND/OR CERTIFICATE(S).