

APPLICATION FOR EMPLOYMENT

IOWA TRIBE
OF OKLAHOMA

PERSONAL	Last Name First Middle			Date
	Street Address			Home Telephone ()
	City, State, Zip			Business Telephone ()
	Are you using Indian Preference? <input type="checkbox"/> yes <input type="checkbox"/> no What Tribe: _____			CDIB Attached <input type="checkbox"/> yes <input type="checkbox"/> no
	Have you ever applied for employment with us? <input type="checkbox"/> yes <input type="checkbox"/> no If yes: Month and Year _____			Pay Expected
	Position Desired			When will you be available to begin work: _____
	Are you legally eligible for employment in the United States? <input type="checkbox"/> yes <input type="checkbox"/> no			Social Security # Driver's License #

Other special training or skill (languages, machine operation, etc.)

EDUCATION	SCHOOL	NAME/LOCATION OF SCHOOL	STUDY	YEARS COMPLETED	GRADUATE	DEGREE OR DIPLOMA
	Graduate					
	College					
	Business/ Trade/ Technical					
	High School					
	Elementary					

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS
(Exclude those which may disclose your race, color, religion or national origin)

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with you present or most recent employer.

Company Name	Telephone ()
Address	Employed - (State month and year) From To
Names of Supervisor	Weekly Pay Start Last
Job Title/Describe your work	Reason for Leaving

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Address	Employed - (State month and year) From To
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May we contact the employers listed above unless you indicate those you do not want us to use. <input type="checkbox"/> yes <input type="checkbox"/> no	DO NOT CONTACT
	Employer: _____ Reason: _____

