

AK-CHIN INDIAN COMMUNITY

HUMAN RESOURCES DEPARTMENT

42507 West Peters and Nall Road

Maricopa, Arizona 85238

FAX: (520) 568-1051



HR Use Only:

Date Rec'd _____

Rec'd by _____ Logged in by _____

Application for Employment

PLEASE PRINT OR TYPE

DATE _____

PERSONAL INFORMATION:

Name Last First Middle
Mailing Address P.O. Box/Street Address City State Zip
Telephone Number (home) _____ (cell) _____ (work) _____
Email Address _____ (disclosure of your email authorizes ACIC to contact you via email)

Are you at least 18 yrs. of age? Yes No (If no, written parental permission will be required.)

If applying for Police or Detention Officer, are you at least 21 years of age? Yes No

Are you authorized to work in the United States? Yes No
(If hired, verification will be required by law.)

TRIBAL ENROLLMENT:

Are you a member of the Ak-Chin Indian Community, or any other federally Recognized Native American Tribe?

Yes No If Yes, what Tribe? _____
(Must submit CIB/Copy of Enrollment Card along with application) Tribe Enrollment No.

POSITION APPLYING FOR:

Position Title: _____ ACIC# _____
Full Time _____ Part Time _____ On Call _____ (as needed basis) Temporary _____ Seasonal _____
Date you are available to work: _____ Wages desired \$ _____ Hourly _____ Annually _____

Have you worked for the Ak-Chin Indian Community before? Yes No

If yes, dates: _____ Position(s) Held: _____ Supervisors Name: _____

Do you have any relatives working for Ak-Chin Indian Community? Yes No
If you answered yes, please list name, relationship and department

EDUCATION:

Do you have a High School Diploma or GED? Yes No

NAME & LOCATION OF SCHOOL	COURSE OF STUDY	YRS COMPLETED	Degree Obtained

List any specialized training and skills, i.e., typing(wpm), computer skills, special tools & equipment you can operate):

Do you have a valid Drivers License? Yes* No Lic.# _____ Exp. Date: _____

Do you have a Commercial Drivers License? Yes* No Lic.# _____ Exp. Date: _____

*****A 39 month MVR must be submitted along with the Application for Employment*****

List any other certificates/licenses that you possess that are related to the position to which you are applying:

Have you been convicted of a felony? Yes No If Yes, list conviction(s), *conviction(s) do not necessarily disqualify an applicant.*

MILITARY DUTY: (attach DD-214)

Branch of Service _____ Dates _____ to _____ (discharge date)

Rank & Duties describe below:

LANGUAGE(s):

Do you speak or write in any language other than English?

O'odham (speak write) Spanish (speak write) _____ Other speak write

EMPLOYMENT HISTORY:

Are you employed at the present time? Yes No If yes, may we contact your current employer? Yes No

