

HANNAHVILLE INDIAN COMMUNITY N14911 HANNAHVILLE B-1 RD WILSON, MICHIGAN 49896

Phone: 906-466-0306 ~ Fax: 906-466-0307

APPLICATION FOR EMPLOYMENT

Instructions: Applications must be *fully completed* to be given consideration. Resumes may be submitted but will <u>not</u> be accepted in lieu of an application. Applications will remain active for sixty (60) days. PLEASE PRINT ALL INFORMATION.

PERSONAL INFORMATION								
Name				Date Middle				
Last	First	Middle						
Address								
Street/P.O. Box	City/Town		State	Zip				
Home Phone #	Work Phone #	Nork Phone # Social Security #						
n case of an emergency, contact: Name: Phone #								
Have you ever been convicted of a crime? ** yes no If yes, state the nature of the offense, when, and								
disposition								
**A conviction record will not necessarily be a bar to employment. This information will be used only for job-related purposes and only to the extent permitted by law.								
Do you have a valid Michigan Driver's license? yes no								
EMPLOYMENT DESIRED								
		Data Mari		Osland				
Position (s)		Date You Can Start		Salary Desired				
Type of Employment (Check all that you would accept) Full Time Part Time Temporary Seasonal								
Are you currently employed? yes no If so, may we contact your current employer? yes no								
Have you ever been employed by any Department of the Hannahville Indian Community or at the Chip-In's Island Resort & Casino/Bingo? yes no If yes, please give department(s), date(s) and position(s)								
Name of referral source? (posting, name of employee, newspaper, etc.)								
If hired, can you show proof of legal authorization to work in the United States? yes no								
EDUCATION & SKILLS – List all High Schools, Colleges, Technical or Special Schools you have attended								
Name of School Ac	dress of School	Degree	or Grade Com	pleted Subject/Major				

Any other skills, seminars, training?

WORK HISTORY – List most recent employer first, including military service assignments and volunteer activities								
Name	Address & Phone # o	of Employer	Dates employed	Position Held	Reason for Leaving			
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<u> </u>								
MILITARY SERV	CE							
Have you ever served in the military? Yes No If yes, which branch & discharge date?								
PERSONAL REF	ERENCES							
Name		Address & Pho	ne #	Occupation	Years known			
APPLICANT'S ST								
l am a member o	f a Federally recognized	l Indian Tribe.	yes no	If yes, name of Trib				
l am a descende	nt of a Tribal member _	yes r	no I am a spouse o	of a Tribal member	yes no			
I certify that all answers given herein are true and complete to the best of my knowledge. I authorize any current and former employers, personal references, registration and licensing boards provided as part of my application for employment to provide any job related references and information requested. The Hannahville Indian Community is also authorized to conduct a police and court investigation of my background if relevant to the job for which I am applying. I understand that all offers of employment are conditional upon successful completion of a drug test and that if I am employed that employment is "at will", that I or the Hannahville Indian Community may terminate the employment relationship at any time, for any reason, with or without notice.								
I HEREBY ACKN	OWLEDGE THAT I HAVE	READ AND UN	IDERSTAND THE A	BOVE STATEMENTS				
Applicant's Signat	ure			Date				