



PYRAMID LAKE PAIUTE TRIBE
Tribal Employment Rights Ordinance Program
PO Box 256
Nixon, NV 89424
Telephone: 775-574-2408

TERO APPLICATION FOR EMPLOYMENT

PLEASE PRINT IN BLACK/BLUE INK OR TYPE. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

EQUAL OPPORTUNITY EMPLOYER: It is our policy to abide by all Federal and State laws prohibiting employment discrimination on the basis of a person's race, color, religion, national origin, sex, age, veteran status, disability, or any other legally protected status. Indian Preference Act applicable.

Application Date: _____ Referred By: _____

Name: _____ Social Security #: _____

List other names you've worked under or are known by: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Phone #: _____

Email Address: _____

Date Available for work? ___/___/20___ Are you over 18 years of age? Yes / No Do you have a CDL? Yes / No

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

Have you ever been convicted of a Felony? Yes / No If yes, please describe the nature of the conviction, explain date, location, court system, and disposition of conviction(s). _____

Are you willing to submit a Drug & Alcohol Test? Yes / No

Do you have experience in any of the following trades? Please circle all that apply.

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> CPR | <input type="checkbox"/> EMT | <input type="checkbox"/> Electrician | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Welder | <input type="checkbox"/> Cement Mason | <input type="checkbox"/> Heavy Equipment Operator | <input type="checkbox"/> Drywall |
| <input type="checkbox"/> Carpenter | <input type="checkbox"/> Carpet/Tile Installer | <input type="checkbox"/> Laborer | <input type="checkbox"/> Landscaper |
| <input type="checkbox"/> Truck Driver | <input type="checkbox"/> Painter | <input type="checkbox"/> Roofer | <input type="checkbox"/> Plumber |
| <input type="checkbox"/> Certified Flagger | <input type="checkbox"/> Mechanic | <input type="checkbox"/> Housekeeping | <input type="checkbox"/> Security Guard |

Certified Food Handler? Yes / No

Other: _____

INDIAN PREFERENCE: Are you a member of a Federally Recognized Tribe? **Yes / No**

If yes, specify the name of your tribe & attach a copy of Enrollment Card and Enrollment Number for verification of Indian Preference.

TRIBAL AFFILIATION: _____ **Enrollment Number:** _____

Local Indian living on the Pyramid Lake Paiute Reservation: **Yes / No**

Indian from surrounding community: **Yes / No**

VETERANS PREFERENCE: Have you served in the United States Military? **Yes / No**

Do you claim Veterans Preference Points? (If yes, attach DD-214 demonstrating proof.) **Yes / No**

EDUCATIONAL BACKGROUND

School	Name and Address of School	Did you graduate?		Graduation Date Mo./Yr.	Major/Minor Courses Taken	Diploma/ Degree
High School 9 10 11 12		YES	NO			
College 1 2 3 4		YES	NO			
Trade School		YES	NO			
Other		YES	NO			

Qualifications: Describe any other education, training, apprenticeship, certificates or licenses acquired from employment or other experiences that are relevant to the position you are applying for.

EMPLOYMENT HISTORY: Please include all information required. Complete present and former employment beginning with the most recent. Referral to resumes or other submitted documents under employment history is not acceptable. Resumes and copies of certificates may be submitted as additional information only.

Employer:		Date of Hire	
Address & Phone #:		From:	To:
Job Position:		Supervisor:	
Work Performed:			
Rate of Pay:		Reason for leaving:	
Starting:	Final:		
Employer:		Date of Hire	
Address & Phone #:		From:	To:
Job Position:		Supervisor:	
Work Performed:			
Rate of Pay:		Reason for leaving:	
Starting:	Final:		
Employer:		Date of Hire	
Address & Phone #:		From:	To:
Job Position:		Supervisor:	
Work Performed:			
Rate of Pay:		Reason for leaving:	
Starting:	Final:		

REFERENCES: List three business/work references that are not related to you.

Name & Mailing Address (Include City, State, Zip)	Phone Number	Years Known

APPLICANTS STATEMENT

I certify that all answers given herein are true and complete to the best of my knowledge. I understand that the Employer is relying upon all the representation, both written and oral, which I have made during the entire process of applying for employment with the Contractor.

I understand this application is not intended to be a contract of employment. Furthermore, I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without prior notice. I understand that no representative or the Employer has the authority to make any assurances to the contrary.

In the event of employment, I understand that if I make any false statements, misrepresentations, or omissions in this application process, I may be discharged at any time during my employment and I agree to hold the Employer, and any person named herein harmless in the event. I understand also that I am required to abide by all rules and regulations of the Contractor.

Applicant Signature

Date Signed

APPLICANTS AUTHORIZATION TO RELEASE INFORMATION

By applying for a position with the Pyramid Lake Paiute Tribe, Tribal Employment Rights Office, I authorize the release of any information related to my record and character to assess my qualifications and suitability for the position. This includes confidential or privileged information, to be provided to any authorized agent of the Tribe, upon presentation of this waiver.

This waiver is valid for 18 months from my signature date, and a photocopy is as valid as the original. The information requested may include employment dates, pay rates, job titles, dependability, attitude, reasons for leaving, education, and any other relevant details.

Full Name (PRINT)

_____/_____/_____
Social Security Number

Signature/Authorization

Date Signed