SAUK SUIATTLE INDIAN TRIBE
APPLICATION FOR EMPLOYMENT

5318 Chief Brown Lane
Darrington, WA 98241
Phone: 360-436-0131
Fax: 360-436-1511
www.sauk-suiattle.com

POSITION APPLYING FOR __________________________ DEPARTMENT ________________________________

RATE OF PAY EXPECTED __________________________ DATE YOU CAN START ________________

PERSONAL INFORMATION

NAME __________________________ SOCIAL SECURITY NUMBER __________________________

Last First Middle

PHYSICAL ADDRESS __________________________

Street City State Zip

MAILING ADDRESS __________________________

Street/PO Box City State Zip

PHONE NUMBER ___________________________ CELLPHONE NUMBER __________________________

IF NATIVE AMERICAN, TRIBAL AFFILIATION __________________________ TRIBAL ENROLLMENT NO ______

ARE YOU 18 YEARS OR OLDER Yes □ No □ E-MAIL ADDRESS __________________________

CAN YOU SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE US? Yes □ No □

DO YOU HAVE A VALID WA DRIVER'S LICENSE? Yes □ No □ License No __________________________

HAVE YOU EVER BEEN EMPLOYED BY SAUK-SUIATTLE INDIAN TRIBE? Yes □ No □

If Yes, from ______________ to ______________ Department __________________________

Start Date ___________ End Date ___________

LIST ANY RELATIVES EMPLOYED BY SSIT __________________________

______________________________________________________________________________

EDUCATION (Please Do Not Use “See Resume”)

<table>
<thead>
<tr>
<th>SCHOOL LEVEL</th>
<th>NAME &amp; LOCATION OF SCHOOL</th>
<th>GRADUATED</th>
<th>CERTIFICATE/ DIPLOMA</th>
<th>MAJOR/ DEGREE</th>
<th>GRADUATION YEAR</th>
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<tr>
<td>H.S. DIPLOMA OR G.E.D.</td>
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<td>Yes □ No □</td>
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<td>TRADE/ BUSINESS SCHOOL</td>
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<td>Yes □ No □</td>
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<td>COLLEGE</td>
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GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

SPECIAL TRAINING OR SKILLS (To include GED, civilian schools, military academies, etc. - complete with dates. Include typing speed, knowledge of computers and software, etc. - please list.) __________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
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OTHER

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR? YES □ NO □
HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES □ NO □
HAVE YOU EVER BEEN CONVICTED OF ANY TYPE OF THEFT OR FRAUD? YES □ NO □

If “Yes,” identify the crime for which you were convicted, the dates of the conviction and the location of the court in which you were convicted. Please provide any details you feel are relevant. Conviction of a crime will not automatically disqualify you from consideration for employment, but will be considered as part of an overall evaluation of your qualifications. Please consult the Background Check Policy, available upon request from Human Resources, for minimum standards. However, failure to list any convictions may be considered as falsifying your application. A criminal background check will be completed in accordance with the Tribal Background Check Policy, available upon request from Human Resources.
_________________________________________________________________________________________________
_________________________________________________________________________________________________

MILITARY SERVICE RECORD

HAVE YOU EVER SERVED IN THE US ARMED FORCES? YES □ NO □

Date Entered _____________________  Date Separated ___________________________________

Branch of Service _______________________________________  Serial Number _____________________________

Selective Service Number _______________________________  Selective Service Class _______________________

DID YOU RECEIVE AN HONORABLE DISCHARGE? Yes □ No □ If No, please explain the circumstances; __________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

SAUK-SUIATTLE INDIAN TRIBE PROVIDES HIRING PREFERENCE FOR SAUK-SUIATTLE INDIAN TRIBAL MEMBERS, OTHER ENROLLED NATIVE AMERICANS AND VETERANS.
Employment History: (Start with the most recent job and work back)

Are you employed now?  Yes □ No □  If yes, may we contact your employer?  Yes □ No □

Job Title ________________________________________ Starting Salary ___________ Ending Salary _____________

Employer _________________________________________________________________________________________

Name    Street    City    State    Zip

Hire Date _______________________________________   Separation Date ___________________________________

Supervisor's Name __________________________________Title _______________________________

Contact Number __________________________________________ Number of employees supervised _____________

Describe Duties Performed ___________________________________________________________________________

_________________________________________________________________________________________________

Reason for leaving _________________________________________________________________________________

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<th>City</th>
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<td>Separation Date</td>
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**Job Title**
Starting Salary __________ Ending Salary __________

**Describe Duties Performed**

Reason for leaving

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**Job Title**
Starting Salary __________ Ending Salary __________

**Employer**
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**Describe Duties Performed**

Reason for leaving
REFERENCES: List three references, not related to you, whom you have known at least three years

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<th>NAME</th>
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<th>OCCUPATION</th>
<th>YEARS KNOWN</th>
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ATTACHMENTS REQUIRED

1. CERTIFICATIONS (Any Educational Degrees, Diplomas, Transcripts, Training Certificates, Etc.)
2. COPY OF DRIVER’S LICENSE
3. ANY DOCUMENTATION SPECIFICALLY REQUIRED BY JOB DESCRIPTION
4. IF CLAIMING NATIVE PREFERENCE, PLEASE ATTACH ENROLLMENT DOCUMENTATION
5. IF CLAIMING VETERANS PREFERENCE, PLEASE ATTACH FORM DD214

CERTIFICATION AND AGREEMENT: (Read Carefully before signing)

I UNDERSTAND AND AGREE THAT:

1. Any misrepresentation or omission of facts in my application or any attachments to my application may result in refusal of employment or if employed, termination from employment.
2. I understand that the Sauk-Suiattle Indian Tribe (SSIT) will make a thorough investigation of my work, educational, personal, and criminal history, and may verify all data, including contacting former employers and educational institutions given in my application, related documents or oral interviews. I authorize such investigation and the giving and receiving of any information requested by SSIT, and I release from liability any person giving or receiving any such information. I understand that falsification will result in refusal of employment or, if employed, termination from employment.
3. I understand and agree that depending on the position, I may be required to take a pre-employment drug test at SSIT’s expense, in addition to random or for cause testing, during my employment to determine if I am alcohol or drug free for the job that I am responsible to perform. Failure to submit to such testing will result in revocation of offer of employment or termination.
4. I understand and agree that certain positions (as described in the job description) may require physical exams in order to ensure an individual is capable of performing the job functions. Such test will be performed post-offer of employment at the SSIT’s expense and employment shall be conditioned on satisfactorily passing such physical exam.
5. If hired, I agree to conform to all applicable rules, regulations, policies, and/or disciplinary procedures of SSIT and/or any department thereof. I understand that those rules, regulations, policies and/or disciplinary procedures are not intended by SSIT to create an obligation of continued employment.
6. I understand that this document is an application for employment and continued employment is not being offered. I hereby understand and agree that if hired, my employment, both during and after probationary period, is for an indefinite period and that nothing in this application or any other SSIT document shall be deemed to create any contract of continued employment between me and SSIT. I understand that my employment can be terminated at any time pursuant to the SSIT policies and procedures. I understand that employment beyond any probationary period or employment for a number of years shall not result in my heightened expectation of continued employment. I understand and agree that any statements to the contrary, whether oral or written, are expressly disavowed and are not to be relied upon by me.

Applicant Signature ___________________________ Date ___________________________
SAUK-SUIATTLE INDIAN TRIBE
Background Investigation Consent and Release Form

Name: ____________________________________________

First: ___________________________ Middle: ___________________________ Last: ___________________________

Former Names, including maiden name: ________________________________________________________________

Date of birth: ___________________________ Social security number: ___________________________

U.S. Citizen: Yes ☐ No ☐ If No, please list immigration status and Visa number: ___________________________

Current address: ________________________________________________________________

Previous addresses (for the past 10 years or to the age of 18 years old, whichever is sooner. If exact previous
addresses are not available, list city and state): __________________________________________________________

___________________________________________________________________________________________

Driver’s License Number: ___________________________ State Issued: ___________________________

Have you ever been convicted of a felony? Yes ☐ No ☐ If yes, please give details including date, state/county court in
which conviction was entered, type of felony and etc. ______________________________________________________

___________________________________________________________________________________________

Have you been convicted of a misdemeanor? Yes ☐ No ☐ If yes, please list the date, state/county court in which
conviction was entered, type of misdemeanor and etc. _____________________________________________________

___________________________________________________________________________________________

Authorization and Release

I hereby authorize the Sauk-Suiattle Indian Tribe and its designated agents and representatives to conduct a comprehensive review of
my background to be generated for employment, promotion, reassignment or retention as an employee. I understand that the scope of
the investigation may include, but is not limited to, the following areas: Verification of Social Security Number, current and previous
residences, employment history including all personnel files, education, character references, credit history and reports, criminal history
records from any criminal justice agency in any or all tribal, federal, state, county jurisdictions, birth records, motor
vehicle records to include traffic citations and registration and any other public records.

I hereby authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, or
public agency may have. I understand that I must provide my date of birth to adequately complete said screening, and acknowledge that
my date of birth will not affect any hiring decisions. I hereby authorize and request any present or former employer, school, police
department, financial institution or other persons having personal knowledge of me, to furnish bearer with any and all information in their
possession regarding me in connection with an application for employment. This authorization and consent shall be valid in original, fax,
or copy form.

I hereby release the Sauk-Suiattle Indian Tribe and its agents, officials, representatives, or assigned agencies, including officers,
employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at
any time, result to me, my heirs, family or associates because of compliance with this authorization and request to relapse. I understand
that a copy of this authorization may be given to me at any time, provided I request it in writing. Information on this application and results
of the background investigation will be maintained in confidence in accordance with Tribal policy. I have read this Background Investigation
Consent and Release form and understand my rights.

Applicant Signature: ___________________________ Date: ___________________________