

Hopi Tribe Economic Development Corporation



Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____ Apartment/Unit # _____
P.O. Box/Street Address
City State Zip Code

Phone: (____) _____ E-Mail Address: _____

Date Available: _____ What Location: _____ Desired Salary \$ _____

Position Applied for: _____

Have you ever worked for this company? YES NO REHIRE If yes, when? _____

If applying to work at Hopi Cultural Center, do you have a valid Food Handler's Card? YES NO

Are you eligible to work in the United States? YES NO

Education

High School: _____
Address: _____ Did you graduate? Yes No GED? Yes No

College: _____
Address: _____ Did you graduate? Yes No Degree: _____

College: _____
Address: _____ Did you graduate? Yes No Degree: _____

References

Please list three professional references.

Full Name: _____
Company: _____ Phone: (____) _____
Address: _____

Full Name: _____
Company: _____ Phone: (____) _____
Address: _____

Full Name: _____
Company: _____ Phone: (____) _____
Address: _____

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Current to Previous Employment

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

YES NO

May we contact your supervisor for verification of above? If no when can we contact them? _____

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

YES NO

May we contact your supervisor for verification of above? _____

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

YES NO

May we contact your supervisor for verification of above? _____

Do you want to be considered for Hopi Native American preference? Yes _____ No _____

If yes, please provide use with your Tribal Enrollment number or Certificate of Native American Blood _____

Do you have a relative who works for HTEDC or one of its entities? Yes _____ No _____

If yes, please tell us who and their relationship to you. _____

I certify that my answers are true and complete to the best of my knowledge. I understand that an offer of employment and my continued employment are contingent upon satisfactory proof of my authorization to work in the United States.

I understand that I may be required to take and pass a drug test as a condition of being hired or continuing my employment, and that a background check may be required depending on the position for which I am hired. I understand that I am hired "at will" and either the HTEDC or I can terminate my employment at any time.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____