



# EMPLOYMENT APPLICATION

(Please print)

## CANDIDATE PROFILE

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Social Security # \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Your Name \_\_\_\_\_  
Last First Middle

Primary phone # (\_\_\_\_) \_\_\_\_\_ Secondary phone # (\_\_\_\_) \_\_\_\_\_

### Present Address

Street Apt # City State Zip

### Permanent Address if different from above

Street A pt # City State Zip

## CANDIDATE AVAILABILITY

Position applying for \_\_\_\_\_ Salary/Wage Desired \$ \_\_\_\_\_

Employment status requesting:  Full time  Part time  Seasonal

Hours and days available to work: Days \_\_\_\_\_ Hours \_\_\_\_\_

Available to work weekends?  Yes  No Available to work overtime if needed?  Yes  No

If hired, what date are you available to work? \_\_\_\_\_

How did you hear about the job?  Newspaper  SignonSanDiego.com  Internet  School  Friend  Employee

## PERSONAL INFORMATION

Have you applied to or worked for Barona Band of Mission Indians before? If yes, when? \_\_\_\_\_  Yes  No

Are you a member of an Indian Band or Tribe?  Yes  No

Do you have friends or relatives working for the Barona Band of Mission Indians?  Yes  No  
If yes, state name(s) and relationship:

Name Relationship

Why do you wish to work for the Barona Band of Mission Indians Tribal Office? \_\_\_\_\_

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.)  Yes  No

Are you currently employed?  Yes  No If yes, may we contact your current employer?  Yes  No

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?  Yes  No

Is there any reason why you would be unable to perform the essential functions of the job for which you applied? If yes, describe the functions that cannot be performed:  Yes  No

Have you ever been convicted of a criminal offense (other than minor traffic violations)?  Yes  No  
If yes, state nature of the crime(s), when and where convicted and disposition of the case

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

The background check and drug test are a condition of employment. Do you understand this requirement?  Yes  No

**EDUCATION INFORMATION**

High School \_\_\_\_\_

Number of years completed? \_\_\_\_\_ Did you graduate?  Yes  No

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Degree or Diploma \_\_\_\_\_

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College/University \_\_\_\_\_

Number of years completed? \_\_\_\_\_ Did you graduate?  Yes  No

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Degree or Diploma \_\_\_\_\_

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Vocational School \_\_\_\_\_

Number of years completed? \_\_\_\_\_ Did you graduate?  Yes  No

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Degree or Diploma \_\_\_\_\_

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If you speak, write or understand any foreign languages, please list them: \_\_\_\_\_

If you feel you have any other experience, training, qualifications or skills, which make you especially suited to work for the Barona Band of Mission Indians, please explain:

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## EMPLOYMENT HISTORY

List below all present and past employment (last ten years is sufficient). Start with your most recent employer. Please account for any periods of unemployment. **You must complete this section even if attaching a resume.**

### 1 MOST RECENT EMPLOYMENT

\_\_\_\_\_  
Name of present or last employer

\_\_\_\_\_  
Address/City, State & Zip

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Reason for leaving employment

\_\_\_\_\_  
Name of Supervisor

Dates employed from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

May we contact for a reference?  Yes  No

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Job Duties/Responsibilities

Wage/Salary: Start \$ \_\_\_\_\_ End \$ \_\_\_\_\_  Hourly  Salary

### 2 PREVIOUS EMPLOYMENT

\_\_\_\_\_  
Name of present or last employer

\_\_\_\_\_  
Address/City, State & Zip

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Reason for leaving employment

\_\_\_\_\_  
Name of Supervisor

Dates employed from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

May we contact for a reference?  Yes  No

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Job Duties/Responsibilities

Wage/Salary: Start \$ \_\_\_\_\_ End \$ \_\_\_\_\_  Hourly  Salary

### 3 PREVIOUS EMPLOYMENT

\_\_\_\_\_  
Name of present or last employer

\_\_\_\_\_  
Address/City, State & Zip

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Reason for leaving employment

\_\_\_\_\_  
Name of Supervisor

Dates employed from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

May we contact for a reference?  Yes  No

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Job Duties/Responsibilities

Wage/Salary: Start \$ \_\_\_\_\_ End \$ \_\_\_\_\_  Hourly  Salary

### 4 PREVIOUS EMPLOYMENT

\_\_\_\_\_  
Name of present or last employer

\_\_\_\_\_  
Address/City, State & Zip

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Reason for leaving employment

\_\_\_\_\_  
Name of Supervisor

Dates employed from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

May we contact for a reference?  Yes  No

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Job Duties/Responsibilities

Wage/Salary: Start \$ \_\_\_\_\_ End \$ \_\_\_\_\_  Hourly  Salary

### 5 PREVIOUS EMPLOYMENT

\_\_\_\_\_  
Name of present or last employer

\_\_\_\_\_  
Address/City, State & Zip

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Reason for leaving employment

\_\_\_\_\_  
Name of Supervisor

Dates employed from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

May we contact for a reference?  Yes  No

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Job Duties/Responsibilities

Wage/Salary: Start \$ \_\_\_\_\_ End \$ \_\_\_\_\_  Hourly  Salary

**AUTHORIZATION STATEMENTS:** Please read and initial the following three statements.

**1. THOROUGH AND ACCURATE COMPLETION** I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed regardless of the time elapsed before discovery. (Your initials here: \_\_\_\_)

**2. WORK HISTORY INVESTIGATION** I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. (Your initials here: \_\_\_\_)

**3. EMPLOYMENT RELATIONSHIP** I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at anytime, with or without prior notice, and with or without cause at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative. (Your initials here: \_\_\_\_)

**REFERENCES**

List below three persons not related to you who have knowledge of your work performance within the last three years. Please provide complete and accurate information.

Name 1 _____ A	Address _____
City _____ State _____ Zip _____	Telephone No. (____) _____
Occupation _____	Number of years acquainted _____

Name 1 _____ A	Address _____
City _____ State _____ Zip _____	Telephone No. (____) _____
Occupation _____	Number of years acquainted _____

Name 1 _____ A	Address _____
City _____ State _____ Zip _____	Telephone No. (____) _____
Occupation _____	Number of years acquainted _____

**Thank you for applying! Please sign and date your application.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

