Tohono O'odham Nation Executive Branch
HUMAN RESOURCES OFFICE
P.O. Box 837 ~ Sells, Arizona 85634 ~ Phone: (520) 383-6540 ~ Tucson (520) 547-8197
Sells Fax: (520) 383-4676 ~ Website: www.tonation-nsn.gov

Thank you for your interest in employment with the Tohono O'odham Nation

Please take the time to validate that your job application is completed properly

Job Application Checklist

- ✓ **Review the entire application in brief before you begin finishing it. (Please print neatly)**
- ✓ **Confirm your contact details are correct**
- ✓ **Check your email address is correct, legible and appropriate for a professional image.**
- ✓ **Verify your employment history for accuracy.**
- ✓ **Avoid leaving blanks, if questions do not apply to you respond with not applicable (N/A)**
- ✓ **Proofread your application carefully before you submit it.**

Required Documents

- **Position List (Correct HRO 210 Number/Position Title/Department)**
- **Current Resume (fully detailed)**
- **High School Diploma/GED, College Degrees and/ or transcripts (Health Care requires official transcripts)**
- **Training Certifications and/or Licensures (Ex: CPR, Food handler, AZ POST Certification etc.)**
- **Valid State Driver's License**
- **39 Month Motor Vehicle Record**
- **Tribal Enrollment Certification or Tribal ID**
- **Applications for Police Officer positions must include notarized Arizona Peace Officer Standards and Training Board (AZ POST) forms.**

Clerical/Assessment Test-(CR)-Clerical Required

Applications for clerical positions must complete Grammar, Spelling, Math and Typing Tests.
(Clerical tests must be scheduled by appointment at any HR location by calling the number listed above)

Please keep copies of all your documents for your own reference.

Revised: September 10, 2019

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Position List

Last Name **First Name** **Middle**

List the 210 number, position title, and department, as noted on the current job summary for all interested vacancies. If the position is listed as "Open Continuous" write "Open Continuous" under HRO 210 number.

HRO 210 Number	Position Title	Department
1.8026/Open Continuous	Receptionist (Example)	Human Resources (Example)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Only one employment application needed with this form.
(Applications are valid for a six (6) month period)

HR Use only:
Grammar: _____%
Spelling: _____%
Math: _____%
Typing: _____ wpm

TOPD Assessment: ☐Exceptional ☐Capable

Human Resources Office Only
Date:

RIST Initial: _____

Tohono O'odham Nation

HUMAN RESOURCES OFFICE
Employment Application

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Employment Application

Applicant Information

Full Legal Name: _____
Last *First* *M.I.*

Are you known by any other names? (If yes, please list below)

Full Legal Name: _____
Last *First* *M.I.*

Email Address: _____

Mailing Address: _____
City *State* *Zip Code*

How would you like to be contacted? ☐ Email ☐ Mail

Main Phone Number: (_____) _____ Alternate Number: (_____) _____

Message Number: (_____) _____

Would you consider temporary employment? YES ☐ NO ☐

Are you a United States citizen or legally authorized to work in the United States? YES ☐ NO ☐
(If hired, you must submit verification)

Are you registered with a federally recognized Indian Tribe? (If yes, provide proof of enrollment) YES ☐ NO ☐

Have you ever been convicted of a felony? YES ☐ NO ☐
If Yes, please explain; include date, place, details and disposition of case (A conviction does not automatically mean that you cannot be considered for employment). Use a separate sheet of paper to complete this question.

Education

Highest level of education completed; (Please attach proof of Transcripts, Degrees, Diplomas or Certificates)

☐ High School Diploma/GED
☐ Business or Trade School
☐ Associates Degree
☐ Bachelor's Degree
☐ Master's Degree
☐ PHD
☐ Juris Doctorate Degree

Employment History

Job Title: _____

From (mo. /yr.) _____ To (mo. /yr.) _____ Average hours worked per week: _____

Salary **$** _____ Reason for Leaving: _____

Company Name: _____ Supervisor's Name: _____

Address: _____ Phone: (_____) _____

City/State/Zip: _____

Did you have employee supervisory experience? ☐Yes or ☐No How many employees did you supervise? _____

Job Title: _____

From (mo. /yr.) _____ To (mo. /yr.) _____ Average hours worked per week: _____

Salary **$** _____ Reason for Leaving: _____

Company Name: _____ Supervisor's Name: _____

Address: _____ Phone: (_____) _____

City/State/Zip: _____

Did you have employee supervisory experience? ☐Yes or ☐No How many employees did you supervise? _____

Job Title: _____

From (mo. /yr.) _____ To (mo. /yr.) _____ Average hours worked per week: _____

Salary **$** _____ Reason for Leaving: _____

Company Name: _____ Supervisor's Name: _____

Address: _____ Phone: (_____) _____

City/State/Zip: _____

Did you have employee supervisory experience? ☐Yes or ☐No How many employees did you supervise? _____

Military Service

Active ☐ Non-Active ☐ Veteran ☐ Commissioned Corps ☐ Other ☐

Branch: _____ From:_____ To:_____

Rank at Discharge: _____ Type of Discharge:_____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

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:_____

Tohono O'odham Nation, Executive Branch
HUMAN RESOURCES DEPARTMENT
P.O. Box 837; Sells, Arizona 85634 ~ Phone: (520) 383-6540 ~ Tucson (520) 295-2464
Fax: (520) 383-4676 ~ Website: www.tonation-nsn.gov

In consideration of my employment or being considered for employment, by the Tohono O'odham Nation, do hereby give permission to release any information on the following to the
Human Resources Office.

- Conviction of a felony
- Misdemeanor or conviction
- Conviction for DUI or other major traffic violations within the past three (3) years.

I also do hereby represent that I (have been) , (have not been) convicted of a felony or misdemeanor involving moral turpitude, and authorize and consent to the disclosure by and to any law enforcement agency, department or officer, to the Tohono O'odham Nation and the Bureau of Indian Affairs, or any of their Officers or agents, any information that they may have or procure concerning my past record or character, hereby waiving any protection I may have to the confidentiality thereof, and releasing them from any claim which may arise on account thereof, or on account of the release or dissemination thereof.

Dated: _____

_____
PRINT FULL LEGAL NAME

_____
SIGNATURE OF APPLICANT

Witness: Human Resources or Other: _____
Name

_____
Address

_____
Telephone Number

Applicant Information

Date of birth: _____/_____/_____ Social Security Number: _____-___-_____

Driver's License Number: _____ Class: _____ Expires: _____/_____/_____

Address, City or village, state of residence for the past seven (7) years

_____

_____

_____

Tohono O'odham Nation
Human Resources Office

Authorization of Release of Information (HRP272)

In consideration of my employment or being considered for employment by the Tohono O'odham Nation, do hereby authorize any and all; individuals, partnerships, corporations, entities or governmental (tribal, State, county, or federal) agencies, to release information to the Tohono O'odham Nation Human Resources Office regarding my past employment with your company and any additional information as required.

Print Full Legal Name: _____ Date: _____

Signature: _____ Date: _____

Social Security Number: _____-___-_____

Signature: _____ Date: _____
Witness