TS'AH BII KIN CHAPTER
Public Employment Program
Required Document Checklist

_____ NAVAJO NATION APPLICATION

_____ SOCIAL SECURITY CARD

_____ CERTIFICATE OF INDIAN BLOOD (CIB)

_____ NAVAJO NATION VOTER REGISTRATION

3. APPLICANT _____
4. PARENT _____
(IF UNDER 17)

_____ PICTURE ID/DRIVER LICENSE

_____ RESUME (If applicable)

_____ LETTER OF INTEREST (If applicable)

Please understand that all applications must have all supporting documents to be considered complete. If there are some documents missing, your application will be returned to you. It is your responsibility to ensure that your application is complete.
Thank you.

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Ts'ah Bii Kin Chapter

Application for Employment

Chapter Administration Use Only

PERSONAL INFORMATION

SOCIAL SECURITY NUMBER	FIRST NAME	MIDDLE INITIAL	LAST NAME

OTHER NAMES USED IF APPLICABLE	MAILING ADDRESS	CITY	STATE	ZIP CODE

DRIVER'S LICENSE NUMBER	TYPE ☐CDL ☐OPERATOR	CLASS	STATE	EXPIRATION DATE (MM/DD/YYYY)

HOME PHONE NUMBER	CELL PHONE NUMBER	MESSAGE PHONE NUMBER	E-MAIL ADDRESS

ARE YOU AN ENROLLED MEMBER OF THE NAVAJO TRIBE? ☐NO ☐YES, Please provide Census Number:_____	IF NO, STATE NATIONALITY	DATE OF BIRTH (MMDDYYYY)

ARE YOU A VETERAN? ☐NO ☐YES, Please prvide aopy of DD Form 214/215	DO YOU WISH TO CLAIM VETERANS' PREFERENCE? ☐NO ☐YES, Please attach an Application for Veteran's Employment Preference.

ARE YOU CURRENTLY EMPLOYED WITH THE NAVAJO NATION?

☐NO ☐YES, Please prvide aopy of DD Form 214/215

REQUISITION NUMBER

REQUISITION NUMBER	POSITION NUMBER	POSITION TITLE

EDUCATION

NAME AND LOCATION OF SCHOOL	DATE ATTENDED (MMYYYY) FROM	DATE ATTENDED (MMYYYY) TO	GED/DIPLOMA/DEGREE RECEIVED	MAJOR/MINOR
HIGH SCHOOL				
COLLEGE/UNIVERSITY				
TECHNICAL/VOCATIONAL/BUSINESS SCHOOL				

LIST ADDITIONAL JOB RELATED TRAINING - INCLUDE DATES OF TRAINING

LIST JOB RELATED SKILLS

The Ts'ah bii kin Chapter gives preference to eligible and qualified applicants in accordance with the Navajo Preference in Employment Act (NPEA) and the Veteran's Preference

REFERENCES: List three persons who are not related to you and who have definite knowledge of your qualification for the position you are applying for. Do not repeat names of supervisors listed under work history

	NAME	ADDRESS	TELEPHONE NUMBER
1			
2			
3			

ADDITIONAL EMPLOYMENT INFORMATION

HAVE YOU EVER BEEN CONVICTED OR A FELONY?

❑ NO ❑ YES, please give date and reason: _____

ATTACH ADDITIONAL SHEET IF NECESSARY

*A CONVICTION DOES NOT AUTOMATICALLY DISQUALIFY YOU, HOWEVER, AN INCOMPLETE ANWER WILL RESULT IN AN INCOMPLETE APPLICATION

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR INVOLVING MORAL TURPITUDE?

❑ NO ❑ YES, please give date and reason: _____

*A CONVICTION DOES NOT AUTOMATICALLY DISQUALIFY YOU, HOWEVER, AN INCOMPLETE ANWER WILL RESULT IN AN INCOMPLETE APPLICATION

LIST ANY PHYSICAL CONDITION(S) WHICH MAY CHALLENGE YOUR ABILITY TO PERFORM THE RESPONISIBILITIES OF THE JOB FOR WHICH YOU ARE APPLYING .

ARE YOU RELATED TO A CHAPTER EMPLOYEE OR CHAPTER OFFICIAL OF TS'AH BII KIN CHAPTER?

❑ NO ❑ YES, please give Name/Title/Relationship

NAME/TITLE: _____ RELATIONSHIP: _____

NAME/TITLE: _____ RELATIONSHIP: _____

EMPLOYMENT HISTORY

(Do not indicate "See Resume". Being with current or most recent position.)

EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MMDDYYYY) FROM	TO	JOB TITLE
			REASON FOR LEAVING
	TELEPHONE NUMBER		IMMEDIATE SUPERVISOR

DESCRIBE DUTIES AND RESPONSIBILITIES

EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MMDDYYYY) FROM	TO	JOB TITLE
			REASON FOR LEAVING
	TELEPHONE NUMBER		IMMEDIATE SUPERVISOR

DESCRIBE DUTIES AND RESPONSIBILITIES

EMPLOYMENT HISTORY - continue

(Do not indicate "See Resume". Being with current or most recent position.)

EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MMDDYYYY) FROM	TO	JOB TITLE
			REASON FOR LEAVING
	TELEPHONE NUMBER		IMMEDIATE SUPERVISOR

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			REASON FOR LEAVING
	TELEPHONE NUMBER		IMMEDIATE SUPERVISOR

DESCRIBE DUTIES AND RESPONSIBILITIES

PRE-EMPLOYMENT STATEMENT - PLEASE READ CAREFULLY AND SIGN THE STATEMENT BELOW

The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresent or ommission of any fact in my application, or any other materials used in the application process, or information offered during any interviews, can be justification fo refusal fo employment, or if employed, termination from employment with the Ts'ah bii kin Chapter. My signature below authorizes the Ts'ah bii kin Chapter to contact any of my prior employers for reference purposes.I understadn that I may be subject ot a background check, and hereby authorize Ts'ah bii kin Chapter to investigate my background to determine any and all infomration of concen as to my record, whethater same is of record or not, and I release employers and persons named in my application form all liability for any damaages on account of his/her furnishing said information. Additionally, ou are hereby authoirized to make any inveetigation of my personal history, educaitonal background, military record, motor vehicle records, criminal records and credit history through an investigative or credit agency or bureau of your choice. I authorize the release of this information by the approriate agencies to the investigating service.

SIGNATURE

DATE