



# EMPLOYMENT APPLICATION

**Nakoda Aaniiih Economic Development Corporation is an Equal Opportunity / At-Will Employer and Practices Indian Preference to qualified Native Americans pursuant to Section 3 of the Tribal Employment Rights Ordinance of the Fort Belknap Indian Community (“TERO”).**

Date Application Received: \_\_\_/\_\_\_/\_\_\_\_

Received by: \_\_\_\_\_



Nakoda Aaniiih Economic Development Corporation  
189 Chippewa Avenue  
P.O. Box 1177  
Harlem, MT 59526  
Executive Director: (406) 301-3005  
Tourism Director: (406) 673-3002

## APPLICATION FOR EMPLOYMENT Applicant Checklist

For proper processing, each page in this packet must be printed on a separate sheet of paper. Double-sided copies are not acceptable.

The following checklist is intended to help you properly complete the process of applying for employment with NAEDC. Read this checklist thoroughly before beginning the application.

- Read both pages of this Application Checklist
- Read the Application for Employment Form Instructions
- Complete the Application thoroughly. Do not leave anything blank.
- Complete the Authorization for Background Check and Pre-Employment Drug Screening.
- Complete the Advisement Regarding False Statements
- Carefully review each document for completeness and signature.
- Enclose copies of requested job advertisement documents and a copy of the following:
  - High School Transcripts/GED
  - College Transcripts
  - Two (2) Valid forms of Identification
  - Tribal Identification or Certificate of Indian Blood (if claiming Indian Preference)
- A resume may not be substituted for any part of the application packet.
- Bring your completed application to our office (at the address listed at the top of this page) by the filing deadline (if applicable), or enclose all application materials in a suitable envelope and send via U.S. Mail, e-mail or fax. If the position for which you are applying for has a filing deadline, your application **MUST BE RECEIVED** in the Office by 5:00 P.M. on the date of the deadline. Your application will not be considered if NAEDC does not receive it by the deadline.

Initial the page to indicate that you have provided a complete application packet & that all information is accurate: \_\_\_\_\_

## Instructions to the Applicant

The information you provide in the Personal History Statement will be used to assist in determining your suitability for the position you are applying.

- It is your responsibility to complete this form and provide all required information.
- Please complete each answer legibly in blue or black ink.
- You must respond to all items and questions. If a question does not apply to you, write "N/A" (not applicable) in the space provided for your response.
- If you need more space for any response, use the last page of the application package and identify your additional information by question number.
- Mail, email, hand-deliver or fax the completed Application Packet to Nakoda Aaniiih Economic Development Corporation, Attention: Leslie "Josie" Cliff at the address listed on the application.

### Disqualification

There are very few automatic bases for disqualification. Even issues of prior misconduct, such as prior illegal drug use, driving under the influence, theft, or even arrest or convictions are usually not, in and of themselves, automatically disqualifying. However, deliberate misstatements or omissions may result in your application being rejected, and you disqualified from employment, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason individuals may be disqualified from employment is because the deliberate withholding or misrepresentation of job-relevant information from a prospective employer.

**BOTTOM LINE:** You are responsible for providing complete, accurate, and truthful responses.

**\*THIS APPLICATION WILL ONLY BE CONSIDERED FOR NINETY (90) DAYS  
OR UNTIL THE POSITION YOU ARE APPLYING FOR IS FILLED\***

Each position applying for requires its own application and that is the responsibility of the applicant.

I have read and understand the above instructions:

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



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Date Received: \_\_\_\_\_

<b>Personal Information</b>			
Last Name	First Name	Middle Name	Today's Date
Street Address	City	State	Zip Code
Home Phone: (____) _____ - _____	Are you a United States Citizen or legally eligible to work in the U. S.? ____Yes ____No		
Work Phone: (____) _____ - _____	Are you an Enrolled Member in a Federally Recognized Native American Tribe? ____Yes ____No		
Other: (____) _____ - _____	Enrollment Number: _____		
Tribe: _____			
Are you 18 or over? ____Yes ____No			
<b>Title of Position Applying For</b>			Date Available to Work
Have you been previously interviewed or employed by NAEDC? ____Yes ____No			
If Yes, list date(s) and job title(s):			
Do you have any relatives currently working for NAEDC? ____Yes ____No			
If Yes, list names and relationship to you:			
Are you employed now?		If so, may we contact your present employer?	

<b>Education (Note: You will be required to furnish transcripts to support all of your educational claims)</b>			
Name and Location	# Years Completed	Major Area of Study	Degree/Diploma
High School			
College			
Graduate School			
Technical or Certificate Programs			

**Employment History** Please provide the following information for your previous three employers, beginning with the most recent: (Please attach an additional page if necessary, do not use “see attached resume”.)

Employer:	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

Employer:	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

Employer:	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

Describe your qualifications for the type of employment you are seeking: (Please include skills, special training, etc.)

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Please list any special awards, honors, scholarships, or offices held.

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<b>References:</b> Please list names of supervisors, managers, or others who can comment directly on your abilities:				
Name	Address	Phone #	Relationship/Occupation	Years Known

<b>Disclosure of Arrests and Convictions:</b>
<p>○ This section requires you to report detentions, arrests, and convictions, including diversion programs that were not successfully completed and in some cases, offenses that may have been pardoned. As an applicant, you are required to disclose this information, unless specifically exempted by state or federal law. It is strongly recommended that you consult with an attorney before omitting any information.</p> <p>○ If more space is needed, continue your response on a separate sheet of paper.</p> <p>Have you EVER been convicted of a criminal offense (felony or misdemeanor) for which a pardon has not been granted? (Including offenses in the Uniform Code of Military Justice)?.....YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>If YES, please explain number of conviction(s), nature of offense(s), when and where and disposition:</p> <p>Are you registered as a Violent or Sexual Offender? YES <input type="checkbox"/> NO <input type="checkbox"/></p>

**Election of Native American / Veteran Preference (Note: You will be required to provide supporting documentation for the preference(s) you have selected):**

Do you wish to claim Native American preference? \_\_\_\_ Yes \_\_\_\_ No  
If so, Tribe and Enrollment Number must be listed on Page 04.

Do you wish to claim a veteran's preference? \_\_\_\_ Yes \_\_\_\_ No

If so, please check the preference you are claiming.

\_\_ Veteran (defined as person separated under honorable conditions who has served on active duty for at least 181 days, or honorably discharged by reason of disability incurred while on active duty).

\_\_ Disabled Veteran (a veteran having a compensable service connected disability as adjudicated by the U.S. Veterans Administration or the retirement board of one of the branches of the Armed Forces which disability is currently existing).

Note: If you elect to use veteran's preference, please enclose proper documentation establishing your right to claim the preference.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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Nakoda Aaniiih Economic Development Corporation is an Equal Opportunity Employer. It is the policy of the Nakoda Aaniiih Economic Development Corporation not to discriminate in employment matters on the basis of race, creed, color, age, marital status, national origin, sex, or status with regard to public assistance or disability.

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I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause of dismissal. You are hereby authorized to make investigation of my personal references.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date





Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: Female \_\_\_\_\_ Male \_\_\_\_\_  
Month/Day/Year

Social Security Number: \_\_\_\_\_

Driver's License # \_\_\_\_\_ State of Driver's License \_\_\_\_\_

Have you ever been convicted of a criminal \*offense or have any pending criminal\* charges against you?

\*This refers only to felonies and misdemeanors; you do not need to include non-criminal traffic violations or municipal non-criminal traffic violations.

Yes \_\_\_\_\_ (provide detail on next page) No \_\_\_\_\_

To the best of my knowledge, the information provided in this Notice and Authorization, my fingerprints and any attachments thereto is true and complete. I understand that any falsification or omission of information may disqualify me for this position and/or may serve as grounds for the severance of my employment with NAEDC. By signing below I hereby provide my authorization to NAEDC to conduct a criminal background check and I acknowledge that I have been provided with a summary of my rights under the Fair Credit Reporting Act which is attached. In addition to those rights, I understand that I have a right to appeal an adverse employment decision made by NAEDC based on my background check information within three business days of receipt of such notice and that a determination on my appeal will be made in seven working days from NAEDC's receipt of such appeal.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date