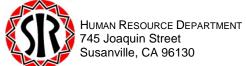
SUSANVILLE INDIAN RANCHERIA LASSEN INDIAN HEALTH CENTER SIR GAMING COMMISSION



For office use	
Date received:	

APPLICATION FOR EMPLOYMENT

This application is considered for one hundred eighty (180) days. If you wish to be considered for later employment, you must renew your application in person at the Human Resource Department.					
		PERSONAL			
1. Last Name	First	Middle	2. Social Secur	ity Number	
3. Street Address			4. Date of Birth checks)	(Required for back	ground
5. City, State, Zip			6. Home Telepl	hone	
7. Position Desired			8. Business Tel	lephone	
9. Do you have the ability to perform job-related functions? ☐ Yes ☐ No If not, what are your limitations?			10. Pay Expected		
11. Have you ever ☐ Yes	applied for work with the Susanville Indian Ranche ☐ No	ria before?	12. When will you be available to begin work?		
13. Are you related □ Yes □ No	to a Tribal Business Council member or employee If yes, please give name(s)	of the Susanville Indian Rancher	ia?		
, , ,	ng under Indian Preference (42 CFR 36.221)? ☐ Y			opy? 🗆 Yes 🗆 🗈	 No
15. Fluent in langua	ages other than English:	Read □ Y □ N V	Vrite □ Y □ N		
16. List skills that q	ualify you for this position:				
17. Special training☐ MS Word	g or skills (languages, machine operation, etc.)	outerwpm	□ Dic	taphone	
☐ Other Skills					
		DUCATION			
School	Name and Location of School	Course of Study	′	No. of Years Completed	Did you Graduate?
18. Graduate	19.	20.		21.	22. ☐ Yes ☐ No
23. College	24.	25.		26.	27. □ Yes □ No
28. Business/	29.	30.		31.	32. □ Yes
Trade/Technical					□ No
33. High School	34.	35.		36.	37. □ Yes □ No
39. The Crime Co following questions 1. Have you 2. Have you under Fe prostituti If yes, please expla	r been convicted of anything other than a minor train on a separate page. If you are hired, this separate page. If you are hired, this separate page. If you are hired, this separate page and the protect of persons applying for positions that involve regular ever been arrested for or charged with a crime in a ever been found guilty of, or entered in a plea of a deral, State, or Tribal law involving crimes of violer on, or crimes against persons?	ate page will not appear in your prison & Family Violence Preventilar contact with or control over Indivolving a child? Y Note Note Note Note Note Note Note Note	on Act, P.L. 101- dian children: uilty to, any felon ation, sexual exp ersonnel file.	ious or misdemean lloitation, sexual co	oor offense ntact or
40. If an offer of employment is made, prior to your commencement of employment duties, you may be required to undergo a medical examination and/or drug test, the results of which may affect the offer of employment. Are you willing to undergo such an exam? \Box Y \Box N					

Application for Employment Page 2

	Lucz ez Wen	v Dei Aren Decembri				
		K RELATED REFERENC	-		•	
List three business/work references that a references that are not related to you.	re not related to you and a	ire not previous supervisors. If	not appli	cable, list three school	or personal	
Name	Telephone	Years Known	Relati	onship to Applicant	Type of Reference	
41.	42.	43.	44.		45. ☐ Personal	
					☐ Professional	
46.	47.	48.	49.		50. □ Personal	
			101		□ Professional	
51.	52.	53.	54.		55. □ Personal	
					☐ Professional	
	-					
		MPLOYMENT				
MUST BE DETAILED AND ACCURATE Start with you present or most recent emp Resume may be submitted as additional in	loyer. Referral to resumes					
56. Company Name	monnation only.			57. Telephone		
				·		
58. Address (include Street, City, State an	nd Zin)			59. Employed – (State	te month and vear)	
Jo. Address (include Street, Sity, State at	ια <i>Σ</i> ιρ <i>)</i>			33. Employed (Otal	.c month and year)	
00 Name of Ourselland					То	
60. Name of Supervisor				61. Weekly pay		
					Last	
62. State Job Title and Describe Your Wo	rk			63. Reason for Leaving		
64. May we contact now? ☐ Yes ☐	☐ No If no, please expl	ain·				
Chimay we demand how.	2 110 II 110; piedeo expi	uii.				
65. Company Name				66. Telephone		
67. Address (include Street, City, State ar	nd Zip)			68. Employed – (Sta	te month and year)	
				From -	То	
69. Name of Supervisor				70. Weekly pay		
·						
71. State Job Title and Describe Your Wo	rk			Start Last 72. Reason for Leaving		
THE CLASS COST THIS GIVE DOCUMENT FOR THE				121 Rodon for Loavi	9	
73. Company Name				74. Telephone		
75. Address (include Street, City, State ar	nd Zip)			76. Employed – (Star	te month and year)	
				F	T-	
77. Name of Supervisor				From To 78. Weekly pay		
Trinamo di Gaponnodi				Tel Weekly pay		
79 Ctota Joh Title and December Volum We	داه				Last	
78. State Job Title and Describe Your Work				80. Reason for Leavi	ng	
81. Explain any gaps in employment:						
I authorize investigation of all statements of in cancellation of this application or dismis establishes employment eligibility and authorize	sal from Susanville Indian	Rancheria if employed. Upon	employm			
The first year of regular employment is contany reason during the Probationary Period other party prior notification. No represent Council or Health Board, has the authority	d without the employee or Sative other than the Tribal	Susanville Indian Rancheria/La Chair for the Susanville Indian	ssen Indi	an Health Center being	g required to give the	
Council of Ficaliti Doard, rias the authority	to office into any employin	от адгоонган.				

83. ____ Date

Signature

Application for Employment Page 3

APPLICANT STATEMENT OF UNDERSTANDING AND RELEASE OF LIABILITY AS WELL AS REQUIREMENTS FOR A CRIMINAL BACKGROUND CHECK

AUTHORIZATION TO RELEASE INFORMATION			
I, 84	s with which I have been associated and personal ssional competence, character, ethical qualifications, sent to the release/disclosure to the Susanville records that may be material to an evaluation of my		
The Susanville Indian Rancheria will not hire or employ per that are subject to the Rancheria's criminal background invo SIR Personnel Policies & Procedures), who do not meet the policy. The required background investigations are intended	estigation policy (subsection 5 of Section 3 of the e minimum standards of character described in that		
Each individual age 18 or over who volunteers to assist or indian Rancheria as having regular contact with or control of investigation, including fingerprinting. All persons subject to obtained by the Susanville Indian Rancheria Gaming Commor Criminal history repositories for all States that are listed as application or volunteer form.	over children, will be subject to a criminal background of this requirement shall have their fingerprints mission for processing through the FBI and State		
You have the right to obtain a summary of the criminal historian Rancheria Human Resources Department and to challenge contained in the report.			
Your signature below constitutes consent to the conduct of prohibit your employment or ability to volunteer in any of the as requiring a criminal background investigation.			
I hereby release from liability all representatives, facilities, enhance attended and/or worked for, from their acts performed evaluating my credentials and qualifications. I also hereby organizations that provide information to the Susanville Indiconcerning my, education, professional competence, ethics	I in good faith and without malice in connection with release from any liability any and all individuals and ian Rancheria's staff in good faith and without malice		
I certify that the statements/documents that I have made/pr correct to the best of my knowledge and belief, and are ma			
I fully understand that a false statement to any question in tinformation otherwise provided may cause my application to if employed.			
I have read and understand above statement.			
85. Signature	86 Date		
87. Social Security Number	88 Driver's License Number		

Application for Employment Page 4

FOR EMPLOYER'S USE ONLY

Testing Results

Tests Administered	Raw Score	Rating	Analysis and Comments
Math			
Grammar			
Spelling			
Vocabulary			
Computer Knowledge			
Office Skills			
Other			