

MILITARY RECORD

Have you ever served active duty in the Armed Forces of the United States? Yes No

Highest Rank attained _____

Branch of Military Service _____

Serial Number _____

Dates of Active Duty From _____ To _____

Type of and Basis for discharge _____

You MUST attach a copy of your DD 214

Member of Reserve? Yes No If yes, Ready Standby Service Branch _____

COURT RECORDS

Have you ever been convicted of violating any law, including any municipal ordinance; Tribal, State, Federal law; or Tribal, State, or Federal Natural Resources; or traffic law? Yes No

Have you ever been arrested or convicted of a crime involving a child or elder, violence, sexual assault, sexual molestation, sexual exploitation, sexual contact or prostitution, or crimes against persons? Yes No

Have you ever been convicted of a felony? Yes No

If you answered yes to any of the questions above, you are required to list all such matters:

Date	Place	Charge	Final Disposition	Details

EDUCATION

Do you possess a High School Diploma, GED, or Certificate of Completion? Yes No **(Must provide documentation)**

If no, are you a KBIC Member currently working on obtaining your GED? Yes No **(Must provide documentation)**

If no, are you 62 years of age or older? Yes No

Dates		Name of School	Location	Course Pursued	Number of Credits	Degree or Diploma
From	To					
<i>High School</i>						
<i>Colleges</i>						
<i>Graduate School</i>						
<i>Miscellaneous</i>						

EMPLOYMENT HISTORY

List, starting with the most recent employer first

Dates		Name/Address/Phone of Employer	Position and Duties	Reason for Leaving
From	To			
		Name:	Title:	
		Address:	Duties:	
		Phone: ()		
		Name:	Title:	
		Address:	Duties:	
		Phone: ()		
		Name:	Title:	
		Address:	Duties:	
		Phone: ()		
		Name:	Title:	
		Address:	Duties:	
		Phone: ()		
		Name:	Title:	
		Address:	Duties:	
		Phone: ()		

Summarize special skills and qualifications acquired from employment and other experiences. Also state any additional information you feel may be helpful in considering your application for employment.

List any machines or equipment that you are qualified and experienced at operating: _____

List any special licenses or certifications your currently possess: _____



AFFIDAVIT AND RELEASE OF INFORMATION

***Please read carefully before signing.
If you have any questions regarding the statements,
please ask us for assistance.***

Under penalty of perjury, I verify the answers given by me to the foregoing questions and the statements made by me in this application for employment are correct, complete and truthful. I understand any false information contained in this application or interview may result in denial or discharge of employment.

I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. Further, I authorize you to communicate with all my former employers, school officials, and persons named as references. I hereby release all employers, schools and individuals from any liability for any damage whatsoever resulting from giving such information.

I understand this application is not intended to be a contract of employment.

I understand the Keweenaw Bay Indian Community conducts pre-employment drug testing and pre-employment physicals. I understand these pre-employment requirements are a condition of employment, and failure to comply will result in denial of employment. Further, I understand any offer of employment is contingent upon the results of such testing. I also understand certain employment positions may require additional testing, such as a tuberculosis screening.

I understand a security background and criminal history check is a condition of employment and requires me to consent, in writing, to such.

I understand as this organization deems necessary, I may be required to work overtime hours or hours outside of a normally defined work day or work week.

If employed, I understand and agree such employment may be terminated at any time and without any liability to me for any continuation of salary, wages, or employment related benefits.

I also understand I am required to abide by the current personnel policies, and any amendments made to those policies.

Signature _____

Date _____