

SUSANVILLE INDIAN RANCHERIA

HOUSING AUTHORITY

870 Joaquin Street
Unit G
Susanville, CA 96130

530-257-5033

SIRHA.ASSISTANT@FRONTIER.COM

FOR OFFICE USE

Date received: _____

APPLICATION FOR EMPLOYMENT

This application will be held on file for 6 months. If you wish to be considered for later employment, you must renew your application in person at the Susanville Indian Rancheria Housing Authority.

PERSONAL

If applying under Indian Preference (42 CFR 36.221), state tribe and **attach a copy of your enrollment card.** This **MUST** be included to receive Indian preference.

Tribe:			Social Security Number	
Last Name:	First:	Middle:	Date of Birth:	
Street Address:			Home Telephone:	
City, State, Zip:			Cell Telephone:	
Position Desired:				
Do you have the ability to perform job-related functions? Yes No If not, what are your limitations?			When will you be available to begin work?	
Have you ever applied for work with the Susanville Indian Rancheria Housing Authority before? Yes No If so, when:				
Are you related to a Susanville Indian Rancheria Housing Authority employee or board member? Yes No If yes, please give name(s): _____				
Fluent in languages other than English: _____ Read Y N Write Y N				

Give three reasons as to why you would be an asset to this company: _____

If an offer of employment is made, prior to your commencement of employment duties, you may be required to undergo a medical examination and you will be subject to a drug test, the results of which may affect the offer of employment.

Are you willing to undergo such an exam? Yes No

Have you ever been convicted of any thing other than a minor traffic violation? Y N

If yes, please explain on a separate page. If you are hired, this separate page will not appear in your personnel file.

SKILLS

Select the level of experience and knowledge of the bellow skills:

	None	Beginner	Intermediate	Advanced
Laborer				
Framing				
Carpentry				
Roofing				
Plumbing				
Electrical				
Concrete				
Heating/Cooling Units				
Insulation				
Drywall				
Flooring				
Woodwork				
Clean-up				
Painting Interior				
Painting Exterior				
Operation of heavy equipment				
Landscaping				

Please list any other skills that qualify you for this position:

EDUCATION

School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?
Graduate				Yes No
College				Yes No
Business/Trade/ Technical				Yes No
High School				Yes No

WORK RELATED REFERENCES

List three business/work references that are not related to you and are not previous supervisors. If not applicable, list three school or personal references that are not related to you.

Name	Telephone	Years Known	Relationship to Applicant	Type of Reference
				Personal
				Professional
				Personal Professional
				Personal Professional

EMPLOYMENT

MUST BE DETAILED AND ACCURATE TO AVOID DISQUALIFICATION. Please give accurate, complete full-time and part-time employment record. Start with you present or most recent employer. Referral to resumes or other submitted documentation under employment history is not acceptable. Resume may be submitted as additional information only.

Company Name -	Telephone
Address (include Street, City, State and Zip)	Employed – (State month and year) From To
Name of Supervisor	Past rate of Pay:
State Job Title and Describe Your Work	Reason for Leaving
Was this a full time job? Yes No If no, how many hours did you work per week?	
May we contact now? Yes No If no, please explain:	

Company Name -	Telephone
Address (include Street, City, State and Zip)	Employed – (State month and year) From To
Name of Supervisor	Past rate of Pay:
State Job Title and Describe Your Work	Reason for Leaving
Was this a full time job? Yes No If no, how many hours did you work per week?	
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Name of Supervisor	Past rate of Pay:
State Job Title and Describe Your Work	Reason for Leaving
Was this a full time job? Yes No If no, how many hours did you work per week?	
May we contact now? Yes No If no, please explain:	

Explain any gaps in employment:

I authorize investigation of all statements on this application. It is further understood that misrepresentation or omission of facts called for herein will result in cancellation of this application or dismissal from Susanville Indian Rancheria Housing Authority if employed. Upon employment I will submit genuine documentation that establishes employment eligibility and authorization to be legally employed within the United States.

Employment at the Susanville Indian Rancheria Housing Authority is considered At-Will. Employment can be terminated by you or the company at any time with or without cause.

Name (please print):

SS#

Signature

Date

APPLICANT STATEMENT OF UNDERSTANDING AND RELEASE OF LIABILITY

AUTHORIZATION TO RELEASE INFORMATION

I, _____, am applying for a position with the Susanville Indian Rancheria Housing Authority. I hereby signify my willingness to appear for interviews in regard to my application and authorize Susanville Indian Rancheria Housing Authority’s representatives to consult with other institutions with which I have been associated and personal references who may have information bearing on my professional competence, character, ethical qualifications, assaultive behaviors and criminal convictions. I further consent to the release/disclosure to the Susanville Indian Rancheria Housing Authority all educational, professional and criminal records that may be material to an evaluation of my qualifications and competence, as well as my ethical behavior for staff membership.

I hereby release from liability all representatives, facilities, educational institutions and training programs which I have attended and/or worked for, from their acts performed in good faith and without malice in connection with evaluating my credentials and qualifications. I also hereby release from any liability any and all individuals and organizations that provide information to the Susanville Indian Rancheria Housing Authority's staff in good faith and without malice concerning my, education, professional competence, ethics, character and other qualifications.

I certify that the statements/documents that I have made/provided in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

I fully understand that a false statement to any question in this application or the misrepresentation of information otherwise provided may cause my application to be disqualified or constitute immediate termination if employed.

I have read and understand above statement.

Name (please print):

SS#

Signature

Date