



Catawba Indian Nation

996 Avenue of the Nations · Rock Hill South Carolina 29730

Local: 803-366-4792 · Fax: 803-327-4853

Website: www.catawbaindiannation.com

Application for Employment

Position(s) Applied For: _____			Date: ____ / ____ / ____		
_____ ; _____					
Last Name:	_____	First Name:	_____	Middle Name:	_____
Maiden Name: (if applicable)	_____	Preferred Name:	_____	Social Security #:	_____
Current Street Address:	_____	City/State Zip:	_____	How Long?	_____
Former Street Address:	_____	City/State Zip:	_____	How Long?	_____

Home Phone:	_____	Cell or Other Phone:	_____
Emergency Contact Name:	_____	Relationship (i.e. Spouse/ Parent):	_____
Emergency Contact Home Phone:	_____	Emergency Contact Cell or Other Phone:	_____

Please indicate below how you heard about this position(s):

<input type="checkbox"/> Employee Referral (Please Provide Name): _____	<input type="checkbox"/> News Ad (Please Specify): _____
<input type="checkbox"/> Our Website or Other Site (Please Specify Site): _____	<input type="checkbox"/> Walk-in:
<input type="checkbox"/> Other Source (Please provide detail): _____	

Date Available to Report to Work: ____ / ____ / ____	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Temporary
Annual Salary or Hourly Rate expected: \$ _____	<input type="checkbox"/> Year	<input type="checkbox"/> Hour	

Are you a Catawba Indian Nation Tribal Member?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<i>If not Catawba</i> , are you a registered member of another federally recognized Native Tribe? If Yes, please specify Tribe: _____	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<i>Note: A Native American Tribal Document is not required to establish work eligibility, but it must be presented upon hire for classification purposes.</i>				
Are you 18 Years of age or older?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Do you have a valid South Carolina Drivers License?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If Yes , list license number and date of expiration: _____	Expires: ____ / ____ / ____			
Are you currently employed?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Have you ever applied for employment with The Catawba Indian Nation?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If Yes , Where/ When: _____	Approx Date: ____ / ____ / ____			
Have you ever been employed by The Catawba Indian Nation?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If Yes , Job Title/ Location: _____	Approx Date: ____ / ____ / ____			
Are you a U.S. Citizen?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Can you provide valid documentation establishing your identity and eligibility to be legally employed in the U.S.?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

We participate in E-verify & SC Newhire to report and verify employment eligibility.

Attendance and Punctuality:

Consistent attendance and punctuality are essential requirements of every position with The Catawba Indian Nation. Is there anything that would interfere with your regular attendance and punctuality if you were hired?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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If Yes, please Describe?

Education:

Level:	Name and Address:	Major:	Diploma/Degree/Certification:
High School:			
College:			
Technical/Other:			

List any clerical, computer skills, or other job skills you offer and include any office equipment you can operate:

List any professional or civic organizations that you are presently a member of and note any offices held:

Employment- Please list your last three employers, starting with your current or most recent position (include military service):

Company Name:	Dates Worked: From: ___/___/___ To: ___/___/___
Address (Including Street, Suite, City, State, & Zip):	Beginning Pay: Ending Pay:
Last Job Title:	Your Duties:
Name of Your Supervisor:	Supervisor Phone/Ext:
Reason for Leaving:	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, please explain why:
Company Name:	Dates Worked: From: ___/___/___ To: ___/___/___
Address (Including Street, Suite, City, State, & Zip):	Beginning Pay: Ending Pay:
Last Job Title:	Your Duties:
Name of Your Supervisor:	Supervisor Phone/Ext:
Reason for Leaving:	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, please explain why:
Company Name:	Dates Worked: From: ___/___/___ To: ___/___/___
Address (Including Street, Suite, City, State, & Zip):	Beginning Pay: Ending Pay:
Last Job Title:	Your Duties:
Name of Your Supervisor:	Supervisor Phone/Ext:
Reason for Leaving:	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, please explain why:

Please provide an account of any gaps in employment.

References - Please list three individuals that you have known for at least two years, who are NOT RELATED to you and are not listed under the employment section of this application:

Table with 5 columns: Name, Occupation, Phone, Address, Relationship. It contains three rows for listing references.

Applicant Statement and Conditions

PLEASE READ CAREFULLY BEFORE SIGNING.

It is agreed and understood that completion of this application does not mean a job opening exists and in no way obligates The Catawba Indian Nation to contact me for an interview or employ me.

I certify that the answers I have provided on this employment application are true, correct, and complete.

Moreover, I understand that any consideration for employment is contingent upon reference checking, my passing a pre-employment drug screen, background investigation process, verification of my identity, and my employment eligibilty. I hereby authorize The Catawba Indian Nation to conduct reference checks, a pre-employment drug screen, and a background investigation.

The Catawba Indian Nation practices Tribal/Native American preference. Native American prefrence shall apply to this position pursuant to the Indian Self- Determination and Education Assistance Act (24 U.S.C. 450, et seq.), 25 CFR 271.44 and other relevant laws (title 25, U.S. code, Section 472 & 473).

I hereby understand and acknowledge that any employment relationship with The Catawba Indian Nation is of an "At-Will" nature, which means that I may resign at any time and The Catawaba Indian Nation may discharge me at any time, with or without notice, and with or without cause, for any reason or for no reason at all.

In the event of employment, I will comply with all policies and procedures of The Catawba Indian Nation. I also understand that The Catawba Indian Nation retains the right to amend, modify, add, or delete any or all policies or procedudres at its sole and absolute discretion.

Applications are only accepted and reviewed for positions posted as vacant or currently posted. Application are not held or reviewed for future positions. Applicants not selected for an interview will not be contacted.

Applicant's Signature: _____

Date: ____ / ____ / ____

Print Name: _____