

Application Procedure

A completed Tribal Employment Application must be submitted by the closing date of the position as advertised. Each section must be completed and the application must be dated and signed. Incomplete applications will not be considered. A resume will not be accepted as a substitute for a completed application. "See Resume" is not acceptable on this application.

- A letter of interest or resume which addresses how the applicant meets the qualifications must be submitted with the application.
- High School or GED documentation or official college transcripts from an accredited college or university that documents educational attainment must be submitted by the closing date of the position.
- For positions that require professional licensure, a copy of the license must be submitted with the application.
- Copies of all other supporting documentation referred in the application and/or the position description must be submitted with the application.
- If you are claiming Native American Preference, proof of Tribal enrollment or affiliation must be submitted with the application.
- If you are claiming Veterans Preference, a copy of the DD214 must be submitted with the application.

Applications and all accompanying documents must be received by 5 p.m. (MST) on the closing date of the position. Applications that do not contain the above information will be considered INCOMPLETE and will not be considered for hire.

Applications will retire in the Personnel Department after one (1) year from the date of submission.

If you are applying for more than one position, a letter of interest for each position is required. It is not necessary to submit additional applications in the same year.

Submit the application packet to:

Personnel Department
Shoshone-Bannock Tribes
P.O. Box 306
Fort Hall, Idaho 83203

or email to: recruitment@sbtribes.com

APPLICATION PROCEDURE CHECKLIST

****PLEASE READ****

YOUR APPLICATION WILL BE RETAINED IN THE PERSONNEL DEPARTMENT FOR ONE YEAR.

1. A completed Tribal Employment Application **MUST** be submitted by the closing date of the position advertisement. Each section must be completed and the application must be signed and dated.
2. A letter of interest or resume' which addresses how the applicant meets each qualification **MUST** be submitted with the application. Please do not write "See Resume" on application.
3. High School or GED documentation, original/official college transcripts from an accredited college or university **MUST** be submitted by closing date of position.
4. Copies of all and other supporting documentation referred to in the application and job description **MUST** be with the application by the closing date.
5. If you are claiming Native American Indian preference, proof of Shoshone-Bannock Enrollment or other tribal affiliation **MUST** be submitted with the application.
6. If you are claiming Veteran's preference, a copy of the DD 214 must be submitted with the application.

****Ask yourself; are the following documents with the application?*****

Professional certifications/licenses (Copies)	Yes	No	
Driver's License (Copy)	Yes	No	State _____
References	Yes	No	
Tribal I. D. for Indian Preference	Yes	No	
DD 214 (Military)	Yes	No	
Educational Degrees (Official Transcripts)	Yes	No	
Completed background check sheet	Yes	No	

If circumstances should change between the time an application is submitted and the time a position becomes available, it is recommended the application be updated to reflect the changes, as long as it is within a year of applying for a position.

Applications and all accompanying documents must be received by the close of business (5:00 p.m. MST) on the closing date of the announcement. Applications that do not contain the above information will be considered **INCOMPLETE** and may be **SCREENED OUT**.

Submit application to: recruitment@sbtribes.com
The SHOSHONE-BANNOCK TRIBES
 Employment Application
 Personnel Department
 P.O. Box 306 Fort Hall Idaho 83203
 Phone 208-478-3857
 208-478-3862
 Fax 208-478-3950

Instructions: All sections of this application must be filled out completely, including the names, addresses and phone numbers of your most recent employers. Attach supporting documents, including: Tribal enrollment, honorable discharge (DD214), educational attainment (degrees conferred, transcripts, etc.), professional certification, license, and other relevant documents to verify your job qualifications and your eligibility for preference.
INCOMPLETE APPLICATIONS MAY BE SCREENED OUT.

PERSONAL

Please Print or Type
 Miss

Date: _____

Mrs. Name: _____ Social Security #: _____

Ms. Address: _____ Drivers License #: _____

Mr. City, State, Zip: _____ State Issued: _____

Telephone #: _____ Are you 18 yrs. of age or older? ___ Yes ___ No

Message #: _____ Male ___ Female ___

Email: _____

Are you an enrolled Shoshone-Bannock Tribal member? ___ Yes ___ No Enrollment #: _____
 Attach Photo Copy.

Tribal Affiliation: _____
 (Please submit a certificate of Tribal enrollment for Indian preference.)

EMPLOYMENT DESIRED:

Positions Applied for: 1. _____

Permanent ___ Yes Part-time/Temporary ___ Yes 2. _____

Reserve ___ Yes Seasonal ___ Yes

Submit a separate letter for each position you wish to be considered for. The letter should state your qualifications for that particular job.

Salary Desired:	Date Available:	Have you ever been employed here before? No ___ Yes ___ Dates _____ to _____
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Are you employed now? ___ Yes ___ No

May we contact your employer? ___ Yes ___ No

Referral Source: _____

Do you have an immediate family member working for the Shoshone-Bannock Tribes? ___ Yes ___ No

Name(s): _____ Relationship(s): _____

Program Name(s): _____

Previous Convictions MAY not exclude an applicant from employment, depending on the position applied for.

Have you ever been convicted of an offense other than a minor traffic violation? ___ Yes ___ No If yes, give date, place, and offense:

1. Date: _____ Place: _____ Offense: _____ Results: _____

2. Date: _____ Place: _____ Offense: _____ Results: _____

3. Date: _____ Place: _____ Offense: _____ Results: _____

EDUCATION / TRAINING

Education	Name and location of School	Years Attended	Graduate		Degree/ Diploma	Field of Study (Major/Minor)
			Yes	No		
High School/ GED						
College						
Trade/Business or other College						

Indicate License; Certification; Professional Credentials: _____

Subjects of Special Studies: _____

Specify Skills: _____

Clerical Skills: Typing Speed _____ Shorthand: _____ Computer Experience: _____

EMPLOYMENT HISTORY

Provide information about your 3 most recent employers (list your current or most recent first). You may be asked to provide additional information; depending upon the position you are seeking. **FAILURE TO PROVIDE COMPLETE, ACCURATE AND VERIFIABLE INFORMATION SHALL BE GROUNDS TO DISQUALIFY THIS APPLICATION.**

Employer	<u>Dates</u>		Work Performed
	From	To	
Address & Phone #			
Job Title			
Supervisor	<u>Hrly. Rate/Salary</u>		
	Starting	Final	
Address & Phone #			
Reason for Leaving			
Employer	<u>Dates</u>		Work Performed
	From	To	
Address & Phone #			
Job Title			
Supervisor	<u>Hrly. Rate/Salary</u>		
	Starting	Final	
Address & Phone #			
Reason for Leaving			
Employer	<u>Dates</u>		Work Performed
	From	To	
Address & Phone #			
Job Title			
Supervisor	<u>Hrly. Rate/Salary</u>		
	Starting	Final	
Address & Phone #			
Reason for Leaving			

Employer	Dates		Work Performed
	From	To	
Address & Phone #			
Job Title			
Supervisor	Hrly. Rate/Salary		
	Starting	Final	
Address & Phone #			
Reason for Leaving			
Employer	Dates		Work Performed
	From	To	
Address & Phone #			
Job Title			
Supervisor	Hrly. Rate/Salary		
	Starting	Final	
Address & Phone #			
Reason for Leaving			
Employer	Dates		Work Performed
	From	To	
Address & Phone #			
Job Title			
Supervisor	Hrly. Rate/Salary		
	Starting	Final	
Address & Phone #			
Reason for Leaving			
Employer	Dates		Work Performed
	From	To	
Address & Phone #			
Job Title			
Supervisor	Hrly. Rate/Salary		
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Employer	Dates		Work Performed
	From	To	
Address & Phone #			
Job Title			
Supervisor	Hrly. Rate/Salary		
	Starting	Final	
Address & Phone #			
Reason for Leaving			
Employer	Dates		Work Performed
	From	To	
Address & Phone #			
Job Title			
Supervisor	Hrly. Rate/Salary		
	Starting	Final	
Address & Phone #			
Reason for Leaving			

MILITARY (DD214 Required)

Service Branch	Date Entered	Date Discharged	Rank Attained	Specialty
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Special Training	Type of Discharge
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REFERENCES

List names and addresses of three (3) persons who are not related to you or who have been your supervisor in the past or currently.

	Name	Address	Business/Title	Phone
1.				
2.				
3.				

State additional comments you feel may be helpful in considering your application.

**AUTHORIZATION TO RELEASE INFORMATION
AND
CERTIFICATION OF ACCURACY**

Authorization is hereby given to the Shoshone-Bannock Tribes to conduct reference and background checks. I also authorize and release every person, firm, previous and current employers, schools, and any other organizations and the Shoshone-Bannock Tribes, from any and all liability whatsoever resulting from the release of this information.

In the event of my employment with the Shoshone-Bannock Tribes, I will comply with all rules, regulations, and policies set forth in the Tribal Personnel Manual, and Management Systems.

I, hereby, certify that the statements made on this application and any documents submitted in support of this application, including but not limited to any resume, transcripts, etc., are true and correct. I understand that misrepresentation or omission of facts in this application or on any of the documents submitted in support of this application shall be cause for rejection of the application or separation from the Shoshone-Bannock Tribes.

Signature: _____ Date: _____

The Shoshone-Bannock Tribes is a drug free work place and we require pre-employment alcohol and drug testing.

This Application will retire one (1) year from date of submission.

