

# YAKAMA NATION HOUSING AUTHORITY

## Application for Employment

P.O. Box 156 \* 611 S. Camas Ave. \* Wapato \* WA \* 98951

PLEASE BE SURE TO COMPLETE ALL INFORMATION ON APPLICATION

### Personal Background

<b>Print Name:</b> Last, First M.	<b>Last four digits of Social Security</b> # XXX-XX-	<b>Are you over 18:</b> <b>Circle One:</b> Yes No
<b>Physical &amp; Mailing Address</b> (if same –only need one):	<b>Indian Preference: Tribe</b>	<b>Enrollment Number</b>
	<b>Valid Drivers License?</b> <b>Circle One:</b> Yes No	<b>Drivers License #:</b>
<b>Phone #</b> Phone#	<b>Endorsement/restriction</b>	<b>Are you a Veteran?</b> <b>Circle One:</b> Yes No
<b>Job Announcement #</b> and/or Position applying for: <b>1<sup>st</sup> Choice:</b> _____ <b>2<sup>nd</sup> Choice:</b> _____	<b>*Are any of your relatives presently employed with YNHA.</b> <b>Check One:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, who?	
<b>Have you ever been convicted of a Felony within the past ten (10) Years?</b> <b>Circle One:</b> Yes No →→	<b>If so, when, where, and disposition of case:</b>	

### Educational Background

Education	Name / Location	Graduated <b>Circle one -Yes or No</b>	Major
GED		Yes/No	
High School		Yes/No	
College:		Yes/No	
Trade / Other		Yes/No	
<b>Other Training / Certificates / Awards Received:</b>			

### Reference

*Give the names of three persons, not related to you, whom you have known at least one year*

Name	Address	Phone #	Yrs. Acquaint.

## EMPLOYMENT BACKGROUND

**This section must be completed entirely. Do Not Write; Refer to Resume.**

<b>A) Company / Address / Supervisor:</b>		<b>Duties / Responsibilities:</b>	
<b>Job Title:</b>			
<b>Salary:</b>	<b>Phone #:</b>	<b>Date of Employment From            To</b>	<b>Reason for Leaving:</b>
<b>B) Company / Address / Supervisor:</b>		<b>Duties / Responsibilities:</b>	
<b>Job Title:</b>			
<b>Salary:</b>	<b>Phone #:</b>	<b>Date of Employment From            To</b>	<b>Reason for Leaving:</b>
<b>C) Company / Address / Supervisor:</b>		<b>Duties / Responsibilities:</b>	
<b>Job Title:</b>			
<b>Salary:</b>	<b>Phone #:</b>	<b>Date of Employment From            To</b>	<b>Reason for Leaving:</b>
<b>D) Company / Address / Supervisor:</b>		<b>Duties / Responsibilities:</b>	
<b>Job Title:</b>			
<b>Salary:</b>	<b>Phone #:</b>	<b>Date of Employment From            To</b>	<b>Reason for Leaving:</b>

**Read and initial the following statements before signing this application.**

I authorize all previous employers and supervisors, including all persons with and for whom I have worked, to give Yakama Nation Housing Authority's (YNHA) representatives any and all information regarding me and my previous employment. I release YNHA, and all previous employers and supervisors from liability for any damages that may result from furnishing information to YNHA ( \_\_\_\_\_ **initial here.**)

I understand that if employed; employment at YNHA is at-will, this means that employees may decide to terminate their employment with YNHA, or YNHA may decide to terminate their employment, at any time, for any reason or no reason ( \_\_\_\_\_ **initial here.**)

I understand that if employed, I am required to undergo an Employee Alcohol and Drug Free Evaluation Test for pre-employment, random, job-related injury, and reasonable cause/suspicion. Positive testing may result in disciplinary action and/or termination ( \_\_\_\_\_ **initial here.**)

I certify that I have answered truthfully and have not knowingly withheld any information relative to my application. I understand that a misrepresentation or material omission on this application will result in my being eliminated from further consideration. I further understand that, if accepted for employment, any misrepresentation or material omission which becomes known to YNHA, will result in immediate termination of my employment. ( \_\_\_\_\_ **initial here.**)

**Applicant; Print Your Full Name:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_