



BLUE LAKE RANCHERIA TRIBAL GOVERNMENT EMPLOYMENT APPLICATION

Submit completed application to the Tribal Office front desk. Phone: (707) 668-5101

APPLICATION MUST BE FILLED OUT COMPLETELY IN ORDER TO BE PROCESSED EVEN IF RESUME IS PROVIDED

Print Clearly and Legibly

Name: _____
First Middle Initial Last Today's Date

Address: _____
Street or Mailing Address City State Zip

Telephone Home: _____ Cell: _____ Email: _____

EMPLOYMENT DESIRED

Position applying for: _____ Hourly Rate or Annual Salary Desired: _____

Are you available to work on weekends? Yes No Would you be available for overtime, if necessary? Yes No

If hired, on what date can you start work? _____

PERSONAL INFORMATION

Driver's License No:	State:	Expiration:	Class:
Do you have a Suspended or Revoked driver's license? If yes, explain:			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a restricted driver's license? If yes, explain:			<input type="checkbox"/> Yes <input type="checkbox"/> No
If hired, would you have a reliable means of transportation to and from work?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever applied to, or worked for, the Blue Lake Rancheria which includes the Blue Lake Casino and Hotel, Blue Lake Gaming Commission Office, Blue Lake Gas Station? If so, what position/dept: _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
Who was your Supervisor:			
Do you have friends, roommates or relatives working for the Blue Lake Rancheria/Casino & Hotel/Gaming? If so, who:			<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a criminal offense? (Conviction for a criminal offense does not necessarily prevent you from being considered for employment). If yes, describe conviction:			<input type="checkbox"/> Yes <input type="checkbox"/> No
If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work? <i>(a social security card is not required to establish work eligibility, but it must be presented upon hire for payroll purposes.)</i>			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? If no, describe the functions that cannot be performed:			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you affiliated with a Federally Recognized Tribe?: <i>(Proof of Tribal membership will be required so we can contact the Tribe Enrollment Dept.)</i> If so, name of Tribe: _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
Enrollment number:			
Fluent languages you speak/read/write:			<input type="checkbox"/> Yes <input type="checkbox"/> No

EDUCATION AND TRAINING (Use additional sheet(s) if necessary).

High School: _____ <small>Name</small> <small>Location</small>
No. of years completed: _____ Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No Degree: _____
College/University: _____ <small>Name</small> <small>Location</small>
No. of years completed: _____ Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No Degree: _____
Vocational school: _____ <small>Name</small> <small>Location</small>
No. of years completed: _____ Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No Degree: _____

EMPLOYMENT HISTORY

Company Name:	Position Held:
Company Address:	Company Phone:
Name of your Supervisor:	Dates Worked:
Reason for Leaving:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain:

Company Name:	Position Held:
Company Address:	Company Phone:
Name of your Supervisor:	Dates Worked:
Reason for Leaving:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain:

Company Name:	Position Held:
Company Address:	Company Phone:
Name of your Supervisor:	Dates Worked:
Reason for Leaving:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain:

OTHER WORK EXPERIENCE

List any additional skills relevant to the job(s) you're applying for:

REFERENCES

Please list three (3) individuals that you have known for at least two (2) years, who are not related to you and are not listed under the employment section of this application:

Name	Occupation:	Phone:
Address:		Relationship:

Name	Occupation:	Phone:
Address:		Relationship:

Name	Occupation:	Phone:
Address:		Relationship:

APPLICANT ACKNOWLEDGEMENT *(Initial)*

_____ I understand I must successfully obtain a Tribal Gaming License if offered employment at a cost of \$100. The total cost will be charged through payroll deduction in (2) \$50 installments. Charges are taken from the 2nd and 3rd paychecks.

_____ I understand the Blue Lake Rancheria conducts drug and alcohol testing. Testing is random, for cause, post-accident, pre-employment or at any other time determined by the Blue Lake Rancheria. Failure to submit to a test or failing a test are both grounds for immediate dismissal.

APPLICANT STATEMENT

CERTIFICATION AND AUTHORIZATION *(Please read the following carefully before signing)*

I certify that the information I have provided is true, complete and correct. I understand that false information or omissions, regardless of when discovered, will be sufficient cause for the refusal to employ or for immediate dismissal. I hereby authorize Blue Lake Rancheria to contact all of my previous employers and/or references and for those parties to release any information requested by the Blue Lake Rancheria. I understand that if I am employed by the Blue Lake Rancheria, it will be as an employee at-will, which means that either party can terminate the employment relationship at any time, with or without cause, with or without notice. I acknowledge that I will be required to submit to a pre-employment drug screen and criminal background check and that the outcome of those tests will affect any offer of employment. This application will be considered active for 90 days.

Signature

Print Name

Date

