



## THE NAVAJO NATION Employment Application

PLEASE PRINT ALL INFORMATION

			PERSONA	L INFORM		N			
SOCIAL SECURITY NUMBER	FIRST NAME			MIDDLE INITIAL		LAST NAME			
OTHER NAMES USED IF APPLICABLE		M	IAILING ADDRESS			CITY	STA	TE	ZIP CODE
		CDL CLASS: OPERATOR		STATE EXPIR/		RATION DATE (MM/DD/YYYY)			
TELEPHONE NUMBER			MESSAGE NUMBER		E-MAIL ADDRESS				
ARE YOU AN ENROLLED MEMBER OF THE NAVAJO TRIBE?		IF YES, INDICATE CENSUS NUN				NATIONALITY	NALITY DATE OF BIRTH (MM/DD/YYYY)		
ARE YOU A VETERAN?				DO YOU WISH TO C	CLAIM VETERANS' PREFERENCE?				
ARE YOU CURRENTLY EMPLOYED WITH	THE NAVAJO NA	TION?		YES	NO				
			POSITION		ATION				
REQUISITION NUMBER			POSITION NUME	BER			POSITION TI	TLE	
			ED	UCATION					
NAME AND LOCATION OF SCHOOL			DATES ATTENDED (MM/YY) FROM TO		GED/DIPLOMA/DEGREE RECEIVED		MAJOR/MINOR		٦
HIGH SCHOOL									
			-						
COLLEGE/UNIVERSITY									
			-						
COLLEGE/UNIVERSITY									
			-						
TECHNICAL/VOCATIONAL/BUSINESS SCHOOL									
LIST ADDITIONAL JOB RELATED 1	FRAINING - INCL	UDE DATES	OF TRAINING						
LIST JOB RELATED SKILLS:									
		The Na	avaio Nation gives pref	erence to eligible and	qualified appl	licants in			

The Navajo Nation gives preference to eligible and qualified applicants in accordance with the Navajo Preference in Employment Act (NPEA) and the Veterans' Preference

REFERENCES: List three persons who are not related to you and who Do not repeat names of Do not names of			ns for the position you are applying for.				
NAME	ADDRESS		TELEPHONE NUMBER				
1.							
2.							
3.							
ADDITIONAL EMI							
HAVE YOU EVER BEEN CONVICTED OF A FELONY? * ATTACH	ADDITIONAL SHEET IF NE		GIVE DATE AND REASON.				
* A conviction does not automatically disqualify you, however, an incomplete answer will result	t in an incomplete application	1					
HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR INVOLVING M IF YES, GIVE DATE AND REASON	IORAL TURPITUDE? *		YES NO				
* A conviction does not automatically disqualify you, however, an incomplete answer will result	t in an incomplete application	1					
DO YOU HAVE ANY PHYSICAL CONDITION(S) WHICH MAY CHALLENGE YOUR ABI PERFORM THE RESPONSIBILITIES OF THE JOB FOR WHICH YOU ARE APPLYING * An incomplete answer will result in an incomplete application	ILITY TO *	YES NO	IF YES, GIVE BRIEF DESCRIPTION				
ARE YOU RELATED TO ANYONE CURRENTLY EMPLOYED WITH THE NAVAJO NATION?							
NAME/ DEPARTMENT:	RELATIONSHIP:						
NAME/ DEPARTMENT:	RELATIONSHIP:						
EMPLOYMENT HISTORY (Do not indicate "See Resume". Begin with current or most recent position.)							
EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPL (MM/DD/Y)		JOB TITLE				
	FROM	то					
	TELEPHONE N	NUMBER	REASON FOR LEAVING				
	IMMEDIATE SUPERVIS	OR:					
DESCRIBE DUTIES AND RESPONSIBILITIES							
		0150					
EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPL	YYY)	JOB TITLE				
EMPLOYER'S NAME AND MAILING ADDRESS	(MM/DD/Y) FROM	ryy) To					
EMPLOYER'S NAME AND MAILING ADDRESS	(MM/DD/Y) FROM TELEPHONE N	YYY) TO IUMBER	JOB TITLE REASON FOR LEAVING				
EMPLOYER'S NAME AND MAILING ADDRESS	(MM/DD/Y) FROM	YYY) TO IUMBER					
	(MM/DD/Y) FROM TELEPHONE N	YYY) TO IUMBER					
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EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY)	JOB TITLE		
	FROM TO			
	TELEPHONE NUMBER	REASON FOR LEAVING		
	IMMEDIATE SUPERVISOR:			
DESCRIBE DUTIES AND RESPONSIBILITIES				
		Τ		
EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY)	JOB TITLE		
	FROM TO			
	TELEPHONE NUMBER	REASON FOR LEAVING		
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DESCRIBE DUTIES AND				
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EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED	JOB TITLE		
	(MM/DD/YYYY) FROM TO			
	Thom .			
	TELEPHONE NUMBER	REASON FOR LEAVING		
	IMMEDIATE SUPERVISOR:			
DESCRIBE DUTIES AND RESPONSIBILITIES	·			

## PRE- EMPLOYMENT STATEMENT - PLEASE READ CAREFULLY AND SIGN THE STATEMENT BELOW

THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. ANY MISREPRESENTATION OR OMISSION OF ANY FACT IN MY APPLICATION, OR ANY OTHER MATERIALS USED IN THE APPLICATION PROCESS, OR INFORMATION OFFERED DURING ANY INTERVIEWS, CAN BE JUSTIFICATION FOR REFUSAL OF EMPLOYMENT, OR IF EMPLOYED, TERMINATION FROM EMPLOYMENT WITH THE NAVAJO NATION. MY SIGNATURE BELOW AUTHORIZES THE NAVAJO NATION TO CONTACT ANY OF MY PRIOR EMPLOYERS FOR REFERENCE PURPOSES.

I UNDERSTAND THAT I MAY BE SUBJECT TO A BACKGROUND CHECK, AND HEREBY AUTHORIZE NAVAJO NATION TO INVESTIGATE MY BACKGROUND TO DETERMINE ANY AND ALL INFORMATION OF CONCERN AS TO MY RECORD, WHETHER SAME IS OF RECORD OR NOT, AND I RELEASE EMPLOYERS AND PERSONS NAMED IN MY APPLICATION FROM ALL LIABILITY FOR ANY DAMAGES ON ACCOUNT OF HIS/HER FURNISHING SAID INFORMATION.

ADDITIONALLY, YOU ARE HEREBY AUTHORIZED TO MAKE ANY INVESTIGATION OF MY PERSONAL HISTORY, EDUCATIONAL BACKGROUND, MILITARY RECORD, MOTOR VEHICLE RECORDS, CRIMINAL RECORDS AND CREDIT HISTORY THROUGH AN INVESTIGATIVE OR CREDIT AGENCY OR BUREAU OF YOUR CHOICE. I AUTHORIZE THE RELEASE OF THIS INFORMATION BY THE APPROPRIATE AGENCIES TO THE INVESTIGATING SERVICE.

SIGNATURE

REVISED 09-16-16

EMPLOYME	ENT HISTORY- CONTI	NUED	
EMPLOYER'S NAME AND MAILING ADDRESS		JOB TITLE	
	(MM/DD/YYYY) FROM TO		
	TELEPHONE NUMBER	REASON FOR LEAVING	
	IMMEDIATE SUPERVISOR:		
CRIBE DUTIES AND	INIMEDIATE SOFER VISOR.		
ESPONSIBILITIES			
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