

Chippewa Cree Housing Authority

75 Laredo Road - Box Elder, Montana 59521 Phone (406) 395-4370 Fax 395-4249

APPLICATION FOR EMPLOYMENT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accomodations to the applications and/or interview process should notify a representative of the Chippewa Cree Housing Authority.

Position applied for:	Date of application:		
Name:	Social Security Number:		
Address:	City/Zip		
Telephone Number:	Tribal Affiliation/Attach enrollment certification		
Have you ever been employed here before?	Type of employment desired		
Yes [] If yes, give dates and position(s)	Full time [] [] Temporary Part time [] [] Seasonal		
No[]	Date available for work:		
Are you a veteran? Yes [] [] No If yes, provide branch, date, and type of discharge.	Were you ever injured on the job? Yes [] No [] If yes, provie date(s) and details		
Can you provide tools, equipment, etc. if they are ess	ential to the job function? [] Yes No []		
ean you provide tools, equipment, etc. If they are ess			
AND PA 107001 AT	or have been convicted of a misdemeanor or felony? s, please provide date(s) or details		
	. Factors such as date of the offense, seriousness and nature of the violation, pplied for will be taken into account.		
Driver's license number if d	riving is an essential job function: State Issued:		

Employment Hist	ory - provide inform:	nation of your pas	t three (3) employers, assignmes	nt or volunteer activites
From:	То:	Employer/	'Address	Telephone#
tarting Job Title		Final Job Title		
Immediate Supervisor/Title		Summarize the work performed and responsibilities		
	revious employer f		Reason for leaving:	
		No []		
Hourly Rate/Salary	Starting \$	Per_	Final \$	Per
From:	То:	Employer,	/Address	Telephone #
Starting Job Title			Final Job Title	
Immediate Superviso	r/Title		Summarize the work perform	ned and responsibilities
May we concact previous employer for reference? Yes [] No []		Reason for leaving:		
Hourly Rate/Salary	Starting \$	Per _	Final \$	Per
From:	То:	Employer	/Address	Telephone #
tarting Job Title		Final Job Title		
Immediate Supervisor/Title		Summarize the work performed and responsibilities		
May we concact p	orevious employer	for reference? No[]	Reason for leaving:	
Hourly Rate/Salary	Starting \$	Per_	Final \$	Per

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		Education		
List scho	pols attended, date graduated,			or field study
School	Date Graduated	Degree/Diploma	Major	Minor
		<u></u>		
Skills - Summa	arize any skills that you f	eel would be pertinent	for the job(s) that y	ou are applying for
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References - lis	t name and telephone num	bers of three (3) business/	work references who	are not related to you
<u> </u>	lame	Telep	hone	# of years known
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Additional Information -	list professional, trade, business, o	r civic associations and any office	s held. Also list any special	accomplishment
awards, etc. Excl	iude activity triat would reveal race	e, color, religion, sex, national ori	gin, citizenship, age, menta	or physical disabilities
	veteran/reserve/r	ational guard or any other simila	r protected status	Frijasoa diodomeico,
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I certify that the	truth and accuracy of the s	tatements herein are liste	d to the best of my ab	ility. I understand that
	misrepresentation or or	mission of the facts called	for is cause for dimiss	al.
	Signature of Applicant	<u> </u>		
	Priorate of Applicant			Date

True Statement/Waiver of Privacy I have made an application for employment with the Chippewa Cree Housing Authority. Pursuant to this application, I understand that any information I have given on my application may be investigated as allowed by law.				
Chippewa Cree Housing Authority fro organizations or entities who posses:	on to investigators, personnal staff, and other authorized employees of the om employers, schools, law enforcement agencies, other individuals, and is such information in order for the Chippewa Cree Housing Authority to orm the duties of the position for which i applied.			
l certify to the best of my knowledge true, correct, complete, and made in	e and belief that all of the statements made on and with my application are good faith.			
hiring me or for dismissal after I have	at any false statement on any part of my application may be grounds for not e been selected for a position. I also understand that I may be punished by prisonment as provided under the Chippewa Cree Law and Order			
Signature of A	Applicant Date			
Additional Requirements	Attach Copy of Tribal Identification Card			
Attach a resume	Attach Copy of valid State of MT Driver License			
Attach a letter of interest	Attach DD214 (if applicable)			
Attach 3 current letters of reference	(no more than a year old)			
Attach Copy of Diploma or GED				
Attach Copy of Degree, Certificates,				
	PLEASE DO NOT WRITE BELOW THIS LINE			
	FOR CCHA USE ONLY			
Application	n received by			
Date of ap	plication			
Interviewe	ed by			
Date of hir	re			

Actual Date of employment

Rejection letter sent

Supervisor