



EMPLOYMENT HISTORY: LIST YOUR PAST WORK RECORDS, INCLUDE ANY INTERRUPTIONS IN YOUR WORK HISTORY SUCH AS SCHOOL. LENGTHY PERIODS OF UNEMPLOYMENT, SABBATICALS, ETC., INCLUDE SELF EMPLOYMENT AND U.S. MILITARY SERVICE. START WITH PRESENT OR LAST POSITION.

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19. NAME OF EMPLOYER:	DATES OF EMPLOYMENT
ADDRESS:	FROM (MONTH AND YEAR):
NAME / TITLE OF SUPERVISOR:	TO (MONTH AND YEAR):
YOUR TITLE:	HOURS PER WEEK:
DESCRIBE EACH MAJOR FUNCTION OR DUTY PERFORMED	
REASONS FOR WANTING TO LEAVE:	

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20. NAME OF EMPLOYER:	DATES OF EMPLOYMENT
ADDRESS:	FROM (MONTH AND YEAR):
NAME / TITLE OF SUPERVISOR:	TO (MONTH AND YEAR):
YOUR TITLE:	HOURS PER WEEK:
DESCRIBE EACH MAJOR FUNCTION OR DUTY PERFORMED	
REASONS FOR WANTING TO LEAVE:	

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21. NAME OF EMPLOYER:	DATES OF EMPLOYMENT
ADDRESS:	FROM (MONTH AND YEAR):
NAME / TITLE OF SUPERVISOR:	TO (MONTH AND YEAR):
YOUR TITLE:	HOURS PER WEEK:
DESCRIBE EACH MAJOR FUNCTION OR DUTY PERFORMED	
REASONS FOR WANTING TO LEAVE:	

CONDITIONS OF EMPLOYMENT  
(Please read carefully before signing)

In submitting an application, I understand that false statements may be grounds for not hiring me or for firing me after I begin work. If I am employed I assure the San Carlos Apache Tribe that I am bondable (for positions which require employees to be bonded). I authorize the San Carlos Apache Tribe to investigate all statements on this application and releases from all liability all persons, corporations, schools, or other organizations furnishing information. I further understand that, if employed on a permanent basis, I will be subject to a probationary period as specified in the Tribal Personnel Policies and Procedures. Incomplete applications will not be considered.

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SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

