



# Bois Forte Reservation Tribal Council

5344 Lakeshore Drive, Nett Lake, MN 55772

(218) 757-3261 (800) 221-8129 Fax (218) 757-3312

[www.boisforte.com](http://www.boisforte.com)

## Application for Employment

*Subject to Indian preference, the Reservation Tribal Council is an equal opportunity employer and will not discriminate against any employee or applicant for employment because of race, color, religion, sex, sexual orientation, national origin, age, or disability.*

PLEASE PRINT USING BLUE OR BLACK INK

Position Applied for \_\_\_\_\_

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Last First Middle Other

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Are you enrolled?  Yes  No  
(Attach proof of tribal enrollment)

Are you a veteran?  Yes  No  
(Attach a copy of DD214)

Driver's License Number (if required by job) \_\_\_\_\_ State \_\_\_\_\_

On what date would you be available for work? \_\_\_\_\_

Will you travel if job requires it?  Yes  No

Do you have any pending criminal charges and/or arrests for which the possibility of criminal prosecution exists?  Yes  No If yes, please explain \_\_\_\_\_

### EDUCATION:

	Name and Address of school	Last Year Completed			Graduated	Degree	Major
		10	11	12			
High School Or GED							
College		1	2	3	4	5	6
Other							

INDIAN PREFERENCE WILL APPLY

**EMPLOYMENT EXPERIENCE:** Start with your present or last job. Include military service assignments. Attach separate sheet of paper if more space is needed. **Experience is an important part of the selection process and failure to complete this section may result in disqualification or non-selection.**

Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor \_\_\_\_\_  
Dates Employed \_\_\_\_\_ to \_\_\_\_\_ Reason for Leaving \_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_  
Detailed description of duties

May we contact this employer?  Yes  No

Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor \_\_\_\_\_  
Dates Employed \_\_\_\_\_ to \_\_\_\_\_ Reason for Leaving \_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_  
Detailed description of duties

May we contact this employer?  Yes  No

Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor \_\_\_\_\_  
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Detailed description of duties

May we contact this employer?  Yes  No

Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor \_\_\_\_\_  
Dates Employed \_\_\_\_\_ to \_\_\_\_\_ Reason for Leaving \_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_  
Detailed description of duties

May we contact this employer?  Yes  NO

**REFERENCES:**

Name Address City, ST Zip	Phone	Years Known
Name Address City, ST Zip	Phone	Years Known
Name Address City, ST Zip	Phone	Years Known

Describe any specialized training, apprenticeship, extracurricular activities, including other languages spoken.

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State any additional information you feel may be helpful to us in considering your application, including volunteer activities.

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**SIGNATURE, CERTIFICATION, AND CONSENT TO RELEASE INFORMATION**

- I understand that acceptance of employment does not create a contractual obligation upon the employer and that this employment relationship is considered “at will”.
- I certify that the answers given herein are true and complete to the best of my knowledge and also understand that providing false, misleading or incomplete information in this application may result in my disqualification or discharge from employment.
- I authorize the Bois Forte Reservation Tribal Council or its agent to verify the information provided herein and contact references contained in this application as deemed necessary.
- I further authorize any former employer and any government agency to release information about me to the Bois Forte Tribal Council upon request and upon presentation of a copy of this signed release. This release is valid for one (1) year after the date of my signature hereon.
- I understand that, if hired, I am required to abide by all policies, rules and regulations of the Bois Forte Reservation Tribal Council.
- I understand that I am required to comply with the Bois Forte Tribal Government Drug and Alcohol Testing Policy & Procedures.

**INCLUDE ATTACHMENTS YOU WISH TO BE CONSIDERED WITH YOUR APPLICATION.  
ALL APPLICATIONS MUST BE RECEIVED VIA US MAIL, FACSIMILE, EMAIL, OR IN PERSON ON THE  
CLOSING DATE.**

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