

## TRIBAL EMPLOYMENT RIGHTS

## **OFFICE**



43 PINSBAARI DRIVE ACOMA, NM 87034

I

PO BOX 309, ACOMA, NM 87034

PHONE: 505-552-5190 X 5541

FAX: 505-552-5198

## **Referral Request Form**

NAME: ADDRESS:					
EMAIL:					
CONTACT #:			BEST TIME TO CALL YOU: AM	] PM	
	(Upate your C	ontact Information frequently to	be considered for future referrals.)		
Check skills or occupations that you are qualified for:					
☐ Carpenter		☐ Masonry	☐ Electrician		
☐ Plumber/Pipe Fitter		Heavy Equipmen	t Accounting		
General Office Help		HVAC	☐ Drywall		
☐ Insulation Applicator		Ironworker	Landscaper		
☐ Painter		Pipe Layer	Sheet Metal		
☐ Surveyor		☐ Tiler	Truck Driver		
Roofer		☐ Plasterer	☐ Other		
If you selected "	Other," please	describe:			
List any Certifica	ations and/or D	)egrees:			
Have you contact	cted the Employ	yer/Contractor: Yes	No		
Native American	: Yes	☐ No Tribal Affil	liation:		
Veteran:	☐ Yes	☐ No Resume (I	f yes, please attach.): Yes No		
hereby attest	that the abov	ve information is true and a	accurate to the best of my knowledge	<del>-</del> -	
Signature:			Date:		

<sup>\*</sup>Return the form and resume (if applicable) to the Acoma TERO located in the Community Development Office (behind the Post Office) or email to dlfelipe@poamail.org