

PUEBLO OF ACOMA APPLICATION FOR EMPLOYMENT

P.O. Box 348, Acoma, NM 87034 Telephone: (505) 552-6728

The Pueblo of Acoma appreciates your submission of this employment application. Please complete application completely and accurately keeping in mind the following:

- The completion of this application represents your ability to provide written communication and follow directions.
- Remember that the information you provide will be the primary source of information in screening applications and making selection decisions.
- Applications will be accepted until the posted closing date of the position.
- Applicants meeting the minimum qualifications of the position will have their applications further reviewed for an interview. If considered for an interview, Human Resources will contact you.
- Attach information necessary to complete the application, e.g., degrees, diplomas, transcripts, DD-214, licenses, training
 certificates or other documents applicable to position. A copy of your current driver's license *must* be attached for
 application to be considered complete.
- Be informed that incomplete and/or illegible applications will not be processed.
- A resume may be submitted but not in lieu of a completed application.
- Application is accepted only for the position advertised.

It is the policy of the Pueblo of Acoma to give preference to any qualified person who is an enrolled Acoma tribal member, members of other federally recognized Indian tribes/nations, and Veterans.

The application of Preference in Employment is not automatic. Applicants requesting consideration for Acoma Tribal member or other Indian Preference must provide valid Tribal enrollment documents or other official certifying documents from federally recognized Indian tribe/nation. Applicants requesting consideration for Veteran's Preference must provide his/her Certificate of Release or Discharge from Active Duty – Form DD214.

Be advised that this employment application form and its attachments are official property of the Pueblo of Acoma and cannot be returned or reused after being submitted.

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| Position Applying For: | Date of Application: |

PERSONAL

| First Name: | Last Name: | | Middle Initial: |
|-----------------------------------|------------------------------------|------------------------------------|--|
| | | Alternate Number: | |
| | | City: | |
| | Zip Code: | | |
| Email Address: | | _ | |
| Driver's License #: | State: | Class: | |
| Date Issued: | Expiration Date: | : | _ |
| Have you previously been emplo | oyed by the Pueblo of Acoma? | Yes No No | |
| Do you have any immediate fam | ily members employed with th | e Pueblo of Acoma? Yes | No 🗌 |
| If yes, name(s) of family membe | rs and relation: | | |
| Date when you can start work: | Are y | you 18 years of age or older? | Yes No No |
| | | | |
| DUCATION | | | |
| NOTE: You are to provide copies | of diploma, certificate or trans | script for the following education | on levels identified. |
| Did you graduate from high scho | ool? Yes No | Year of Graduation: | |
| If no, did you receive your GED o | certificate? Yes N | lo Date of GED Certificat | te received: |
| Name & A | Address of School(s) | Course of Study | Degree/Certificate Type |
| Undergraduate School | | | ☐ Degree ☐ Certificate ☐ Enrollment Only |
| Graduate School | | | ☐ Degree ☐ Certificate ☐ Enrollment Only |
| Other (Specify) | | | Degree Certificate |
| | | | ☐ Enrollment Only |
| | | | |
| Describe applicable courses, clas | sses, training, certifications, an | d extra-curricular activities: | |
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EMPLOYMENT HISTORY

Fill in all blanks completely; leaving blank spaces may delay verification for employment. Employment history is to start with your PRESENT or CURRENT job and go back. Include any job-related military service assignments and volunteer activities.

| Employer: | Job Title: |
|---|--|
| Address: | Rate of Pay: |
| Telephone Number(s): | Name of Supervisor: |
| Dates of Employment: | Reason For Leaving: |
| From: To: | |
| Describe Major Job Duties: | |
| | J |
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| | |
| Did you leave employment in "Good Standing" Yes No | If no, please explain: |
| May an inquiry be made to employer regarding your Yes No character, qualifications, and record of employment? | If no, please explain: |
| | |
| Employer: | Job Title: |
| Address: | Rate of Pay: |
| Telephone Number(s): | Name of Supervisor: |
| Dates of Employment: | Reason For Leaving: |
| From: To: | |
| Describe Major Job Duties: | J |
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| Did you leave employment in "Good Standing" Yes No | If no, please explain: |
| Did you leave employment in Good Standing | if no, please explain: |
| May an inquiry be made to employer regarding your Yes No | If no, please explain: |
| character, qualifications, and record of employment? | |
| | |
| Employer: | Job Title: |
| Address: | Rate of Pay: |
| | _ |
| Telephone Number(s): | Name of Supervisor: |
| Dates of Employment: | Name of Supervisor: Reason For Leaving: |
| Dates of Employment: From: To: | · |
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| Dates of Employment: From: To: Describe Major Job Duties: | Reason For Leaving: |
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| Dates of Employment: From: To: Describe Major Job Duties: | Reason For Leaving: |

| Employer: | | Job Title: | |
|--|---------------|--|------------------------|
| Address: | | Rate of Pay: | |
| Telephone Number(s): | | Name of Supervisor: | |
| Dates of Employment: | | Reason For Leaving: | |
| From: To: | | | |
| Describe Major Job Duties: | | | |
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| Did you leave employment in "Good Standing" | Yes N | No If no, please explain: | |
| Did you leave employment in Good Standing | | | |
| May an inquiry be made to employer regarding you | r Yes N | No If no, please explain: | |
| character, qualifications, and record of employment? | | | |
| Employer: | | Job Title: | |
| Address: | | Rate of Pay: | |
| Telephone Number(s): | | Name of Supervisor: | |
| Dates of Employment: | | Reason For Leaving: | |
| From: To: | | 1.00000 | |
| Describe Major Job Duties: | | | |
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| Did you leave employment in "Good Standing" | Yes N | No If no, please explain: | |
| May an inquiry be made to employer regarding you | r Yes N | No If no, please explain: | |
| character, qualifications, and record of employment? | , | | |
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| ADDITIONAL INFORMATION AND QUALI | | | |
| f the position/vacancy requires a CDL, driver's license, or | | | or licenses, you are t |
| provide copies for verification. Please list below additiona | | | |
| List specialized or job-related skills and qualifications a | acquired fro | om employment or other experience: | |
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| List specialized skills in office equipment, machinery, c | omputer ap | plications or other equipment (such as PC, | Fax, Backhoe, etc.): |
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| Briefly state any additional information you feel may be | e helnful to | ous in considering your application. | |
| blichy state any additional information you rec. may a | ic licipiai a | Justili considering your application. | |
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PROFESSIONAL REFERENCES - Excluding Relatives

Name three (3) people, excluding relatives, who know of your education, work experience and qualifications.

| Name: | Telephone Number: | |
|------------|-------------------|--|
| Address: | Email Address: | |
| Job Title: | Years Known: | |
| Name: | Telephone Number: | |
| Address: | Email Address: | |
| Job Title: | Years Known: | |
| Name: | Telephone Number: | |
| Address: | Email Address: | |
| Job Title: | Years Known: | |

PREFERENCE IN EMPLOYMENT

| Are you requesting employment preference? (Check the box which applies to you) | | | |
|--|--|--|--|
| \square Yes, I am an enrolled member of the Acoma Pueblo (Certificate of Indian Blood or Tribal ID card). | | | |
| Yes, I am an enrolled member of a federally recognized Indian tribe/nation (official verifying document from federally | | | |
| recognized Indian/tribe nation). | | | |
| Yes, I am an honorably discharged Veteran (Certificate of Release or Discharge from Active Duty – Form DD214). | | | |
| No, I am not requesting employment preference. | | | |

ACKNOWLEDGEMENT

necessary for consideration of employment. I understand a background check will be conducted.

I understand that fraudulent, false, misleading, or incomplete information or answers to any questions, on any part of this application and its attachments, may be grounds for not hiring me or for terminating employment after I begin work. I consent to the release of information about my ability and fitness for employment by employers, schools, law enforcement agencies and other individuals and organizations to the Pueblo of Acoma. I further understand that I will be required to adhere to and accept all rules, regulations, policies, and procedures of the Pueblo of Acoma.

I certify that, to the best of my knowledge, the information given and attached to this application are true and accurate. I understand and do hereby authorize an investigation of all statements contained in this application for employment as deemed

| Signature: | Date: | |
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Applications can be submitted by one of the following methods:

- Email the application to llouis@poamail.org
- Mail to: Pueblo of Acoma Human Resources Department P.O. Box 348 Acoma, NM 87034
- Hand carry to Pueblo of Acoma Human Resources Department 41 Pinsbaari Drive Acoma, NM 87034