

EDUCATION & TRAINING

	Name & Location of School	Major Area of Study	Degree Received	Date of Completion (Month/Year)
High School / GED				
College, Vocational or Trade School(s)				
Graduate School(s)				

CERTIFICATES OF SPECIALIZED TRAINING, LICENSES OR PROFESSIONAL REGISTRATION

Description	License or Registration #	Date Issued

WORK EXPERIENCE

Beginning with the most recent, please list all relevant employment experience in the last 15 years. Include service in the military and explain all gaps in employment.

From _____ to _____ Employer: Address: Supervisor: Phone:	Title: # Supervised: Duties:	Ending Salary: Reason for leaving:
From _____ to _____ Employer: Address: Supervisor: Phone:	Title: # Supervised: Duties:	Ending Salary: Reason for leaving:
From _____ to _____ Employer: Address: Supervisor: Phone:	Title: # Supervised: Duties:	Ending Salary: Reason for leaving:

From _____ to _____ Employer: Address: Supervisor: Phone:	Title: # Supervised: Duties:	Ending Salary: Reason for leaving:
From _____ to _____ Employer: Address: Supervisor: Phone:	Title: # Supervised: Duties:	Ending Salary: Reason for leaving:
From _____ to _____ Employer: Address: Supervisor: Phone:	Title: # Supervised: Duties:	Ending Salary: Reason for leaving:

How did you hear about us?

Shingle Springs Rancheria Website
 Mountain Democrat
 Gold Panner

Indian Health Services
 Current Employee
 Other: _____

Craigslist
 Indeed

CERTIFICATION OF APPLICANT

I hereby certify that all information provided on this application is true, and I agree and understand that any misstatement or omission of material facts herein may cause forfeiture on my part of any employment or payment as an employee in the service of the Tribe. I further agree to be fingerprinted and to submit to a complete background investigation and upon employment to furnish such proof of age as may be required.

Signature

Date