LUMMI INDIAN BUSINESS COUNCIL Employment Application

2665 Kwina Road, Bellingham, WA 98226 - Fax No 360-380-6991 Email: <u>LIBCHR@lummi-nsn.gov</u>

Please include a cover letter, resume, reference letters and proof of education/transcripts along with this application

Please Type or Print. Answer all questions fully and accurately. Your Application will not be considered if it is not signed or if it is returned after positions advertised closing date.							
Name	iot sigi	ica or ii it io retarrica arte	positions advertis	oca closing date.			
Please list any aliases, previous name, nickname, other name change, legal or otherwise							
Address (Street, PO		iouo namo, montamo, our		lid WA Driver's Lice	nse?		
			☐ Ýes ☐ No				
City State	State Zip			Phone No.			
Hamban and different	1	1/ 1 (1 -	E-mail Address				
How long at this resid		It less tha Illy Recognized Native Am		her addresses on su	ipplemental page		
		al enrollment verification, in			ach a copy of		
enrollment card/verifica	ation to	this application in order to r	eceive points in the s	selection process.	don a copy or		
Name of Tribe/Nation			Enrollment No				
Are you a Lummi Fisl ☐ Yes ☐ No	herman		u legally permitted ☐ No	to work in this coun	try?		
Are you an American	Vetera		_				
If yes, list the branch s	erviced	, Date of entry-and discharg	ge and type of Discha	arge.			
Have you ever been o	onvicte	ed of any offense(s)? Incl	ude all offenses wh	ere you have been f	ound guilty, pled		
		o contest). (Leave out traff					
FAILURE TO DISCLO	SE CON	NVICTIONS WILL RESULT	IN LOSS OF EMPLO	DYMENT OPPORTU	NITY.		
Have you ever been f	ingerpr	rinted? ☐ Yes ☐ No	f Yes , please list rea	ıson			
Position(s) Applying For							
			•		Years of		
		Applying For f Preference)	Expe Wage/\$		Years of Experience		
			•				
			•				
(In	Order o	f Preference)	•				
EDUCATION (Provide	Order o	of Transcripts or Diploma)	Wage/S	Salary	Experience		
EDUCATION (Provide Type of School	Order o	f Preference)	Wage/S				
EDUCATION (Provide Type of School High School	Order o	of Transcripts or Diploma)	Wage/S	Salary	Experience		
EDUCATION (Provide Type of School High School Vocational/Trade	Order o	of Transcripts or Diploma)	Wage/S	Salary	Experience		
EDUCATION (Provide Type of School High School Vocational/Trade College/University Type of Degree Obtai	Copies	of Transcripts or Diploma) Name and Sta	Wage/S	Salary	Experience		
EDUCATION (Provide Type of School High School Vocational/Trade College/University Type of Degree Obtai What is your Degree	Copies ned □	of Transcripts or Diploma) Name and Sta Associates □ BA □	Wage/S	Years Completed Other	Graduated Y/N		
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Please list names of your immediate family member(s) that are currently employed with the Lummi Nation							
Family Members Name	Position/Title		Relationship				
Employment History (Please List Present or Last Position First) Provide work history for last 5 years. If unemployed or in school, please list. Supplemental sheet available.							
Name of Employer	Position/Title		Dates of Employment				
Supervisors Name	Phone Number		Beginning Rate of Pay				
			Ending Rate of Pay				
Explain in Detail your duties							
What do/did you enjoy most about t	his position?	What do/did you enjo	y <u>least</u> about this position?				
Explain why you left this position or	why you wish	to leave current positi	on				
Name of Employer	Position/Title		Dates of Employment				
Supervisors Name	Phone Number	er	Beginning Rate of Pay				
			Ending Rate of Pay				
Explain in Detail your duties							
What do/did you enjoy most about this position? What do/did you enjoy least about this position?							
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Explain why you left this position or why you wish to leave current position							
Agreement and Declarations Please Read the Following Prior to Signing Application							
I certify that the statements made in this application are correct and complete to the best of my knowledge.							
I understand that false or misleading information may result in termination of my employment. I authorize the LIBC Human Resources (HR) Department to verify any of the statements, employment/education information provided and to solicit information desired in connection with this application. I hereby release said organizations, companies and individuals from all liability for any damage for issuing this information. I understand that all positions are subject to criminal background investigation. If accepted for employment with LIBC, I agree to abide by all LIBC Policies and Procedures. I understand that any false statements made by me may be considered sufficient cause for cancellation of any opportunity to work for the LIBC and/or dismissal if already employed. I understand that if I owe the Lummi Nation or any of its entities an account receivable or other debt, I must make arrangements to pay this debt to be considered for a position with the Lummi Nation. The HR Department must receive from the LIBC Accounting Department a written statement stating I have made arrangements to repay my debt							
Signature of Applicant Date							

Supplemental page for Residence verification

Name		
Address (Stree	t or PO Box)	
City	State	Zip
Dates lived at t	his residence	
Address (Stree	t or PO Box)	
City	State	Zip
Dates lived at t	his residence	
Address (Stree	t or PO Box)	
City	State	Zip
Dates lived at t	his residence	
Address (Stree	t or PO Box)	
City	State	Zip
Dates lived at t	his residence	
Address (Stree	t or PO Box)	
City	State	Zip
Dates lived at t	his residence	

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Supplemental page for employment history

Name of Employer	Position/Title		Dates of Employment					
Supervisors Name	Phone Number		Beginning Rate of Pay					
			Ending Rate of Pay					
Explain in Detail your duties								
What do/did you enjoy most about this position? What do/did you enjoy least about this position?								
Explain why you left this position or why you wish to leave current position								
Name of Employer	Position/Title		Dates of Employment					
Supervisors Name	Phone Number		Beginning Rate of Pay Ending Rate of Pay					
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What do/did you enjoy most about this position?		What do/did you enjoy <u>least</u> about this position?						
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Explain why you left this position or why you wish to leave current position								
Name of Employer	Position/Title		Dates of Employment					
Supervisors Name	Supervisors Name Phone Number		Beginning Rate of Pay					
			Ending Rate of Pay					
Explain in Detail your duties								
What do/did you enjoy most about	est about this position? What do/o		id you enjoy <u>least</u> about this position?					
Explain why you left this position or why you wish to leave current position								
Name of Employer	Position/Title		Dates of Employment					
Supervisors Name	Phone Number		Beginning Rate of Pay					
Explain in Detail your duties Ending Rate of Pay								
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