



**Tucson Indian Center**  
**160 N. Stone Avenue\* Tucson, AZ 85701**  
**P: 520-884-7131 F: 520-884-0240**

Date \_\_\_\_\_ Position Applying For \_\_\_\_\_  
 Department \_\_\_\_\_

**PERSONAL INFORMATION**

Name \_\_\_\_\_ Driver's License Number \_\_\_\_\_  
Last First Middle

Present Address \_\_\_\_\_  
Street City State Zip

Mailing Address \_\_\_\_\_  
Street City State Zip

Phone Number ( ) Message Number ( )

If Native American, Tribal Affiliation: \_\_\_\_\_ Tribal Enrollment No.: \_\_\_\_\_

Are you 18 years or older Yes  No  E-Mail Address: \_\_\_\_\_

Are you authorized to work in the United State? Yes  No

Do you have a valid AZ driver's license? Yes  No  License Number \_\_\_\_\_

Have you ever been employed by TIC? Yes  No  If yes, When \_\_\_\_\_

Department \_\_\_\_\_ Supervisor \_\_\_\_\_

List any Board members or Staff that are relatives employed by TIC

<b>EDUCATION (Must be completed, Please do not write "See Resume")</b>					
<b>School Level</b>	<b>Name &amp; Location</b>	<b>Graduated</b>	<b>Certificate/Diploma</b>	<b>Major/Degree</b>	<b>Graduation Year</b>
High School/G.E.D					
Trade/Business School					
College					
Graduate School					

**OTHER**

Have you ever been convicted of a misdemeanor? Yes  No   
Have you ever been convicted of a Felony? Yes  No   
Have you ever been convicted of any type of theft or fraud? Yes  No

If yes, identify the crime for which you were convicted, the dates of the conviction and the location of the court in which you were convicted. Please provide any details you feel are relevant.  
Conviction of a crime will not automatically disqualify you from consideration for employment but will be considered as part of an overall evaluation of your qualifications. However, failure to list any convictions may be considered as falsifying your application.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MILITARY SERVICE RECORD**

Have you ever served in the US Armed Forces? Yes  No   
Date entered \_\_\_\_\_ Date Separated \_\_\_\_\_

Branch of Service \_\_\_\_\_ Did you receive an honorable discharge? Yes  No

If no, Please explain the circumstances \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT HISTORY** (Start with most recent job, please do not write "See Resume")

Are you employed now? Yes  No  If yes, may we contact your employer? Yes  No

Job Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Employer \_\_\_\_\_  
Telephone Number ( ) \_\_\_\_\_ Number of employees supervised \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
Hire Date \_\_\_\_\_ End Date \_\_\_\_\_

Describe duties performed \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Job Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
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Describe duties performed \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
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\_\_\_\_\_

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Telephone Number ( ) \_\_\_\_\_ Number of employees supervised \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
Hire Date \_\_\_\_\_ End Date \_\_\_\_\_

Describe duties performed \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
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Supervisor's Name & Title \_\_\_\_\_  
Hire Date \_\_\_\_\_ End Date \_\_\_\_\_

Describe duties performed \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

**GENERAL INFORMATION**

Specify day and hours available \_\_\_\_\_

Full-Time  Part-Time  Temporary  Summer Only

Will you travel, if required? Yes  No

Subjects of special study or research work \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Special training or skills \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Career objectives, describe your career goals? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What languages other than English are you fluent in \_\_\_\_\_

\_\_\_\_\_

Speaking  Reading  Writing

Approximate typing speed? \_\_\_\_\_

Office computer/equipment skills (type of hardware/software)? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How were you referred to Tucson Indian Center? Check all that apply**

Self referred  Friend  Relative  Agency  Job Fair  Advertisement

<b>REFERENCES: List three persons not related to you, whom you have known at least three years</b>				
<b>Name</b>	<b>Address</b>	<b>Phone No.</b>	<b>Occupation</b>	<b>Years Known</b>


**CERTIFICATION AND AGREEMENT (Read carefully before signing)**

**I understand and agree that:**

1. Any misrepresentation or omission of facts in my application or any attachments to my application will result in refusal of employment or if employed, termination from employment.
2. It is my understanding that the Tucson Indian Center will make a thorough investigation of my work, educational and personal history and may verify all data given in my application, related papers or oral interviews. I authorize such investigation and the giving and receiving of any information requested by TIC, and I release from liability any person giving or receiving any such information. I understand that falsification will result in refusal of employment or, if employed, termination from employment.
3. I understand and agree that I will be required to take a pre-employment drug test at TIC expense, in addition to random or for cause testing, during my employment to determine if I am alcohol or drug free for the job I am responsible to perform. Failure to submit to such testing will result in termination.
4. I authorize any physician, including my personal physician, to release any information to TIC, which may be necessary to determine my ability to perform my assigned duties.
5. I agree to conform to all applicable rules, regulations, policies, and/or disciplinary procedures or TIC and/or any department thereof. I understand that those rules, regulations, policies and/or disciplinary procedures are not intended by TIC to create an obligation of continued employment.
6. I understand that this document is an application for employment and continued employment is not being offered. I hereby understand and agree that my employment, both during and after introductory period, and that nothing in this application or any other TIC document shall be deemed to create any contract of continued employment between me and TIC. I understand that my employment beyond any introductory period or employment for a number of years shall not result in my heightened expectation of continued employment. I understand and agree that any statements to the contrary, whether oral or written, are expressly disavowed and are not to be relied upon by me.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

**ATTACHMENTS REQUIRED**

1. Certifications (Any Educational Degrees, Diplomas, Training Certificates, Etc.)
2. Military I.D. Card (If applicable)
3. Copy of Driver's License and Driving Record (Available through Motor Vehicle Division)
4. Copy of Tribal Enrollment