



TERO HIRING HALL APPLICATION

Tribal Employment Rights Ordinance Office
P.O. Box 306, Fort Hall, ID 83203
Phone (208) 478-3848 Fax (208) 478-3756

Instructions: This application will be maintained in the TERO Office for a period of one year. Please complete all sections of this application. Submit or attach the following documents: 1) Tribal ID or CIB, 2) copies of any certificates or licenses that you possess and 3) other documents that may verify eligibility for preference and job qualification.

Today's Date _____ Name _____ SSN _____

Mailing Address _____ City _____ State _____ Zip _____

Physical Location (If different from above) _____

Home Phone _____ Message Number _____ Male _____ Female _____

Are you younger than 16? Yes _____ No _____ Between 18 - 64? Yes _____ No _____ Older than 64? Yes _____ No _____

Are you a member of the Shoshone-Bannock Tribes? Yes _____ No _____ Enrollment No. _____

Are you enrolled in another Tribe? Yes _____ No _____ What tribe? _____

****If you are a member of another Tribe, you must provide documentation of Indian status to be eligible for Indian Preference****

Are you a Non-Indian? Yes _____ No _____ If you are a supporter of an Indian Family, please identify the qualifying name and provide documentation of family: _____

Do you reside on the Fort Hall Indian Reservation? Yes _____ No _____ Are you Head of Household? Yes _____ No _____

Do you have a Drivers License? Yes _____ No _____ State Issued _____ Do you have a CDL? Yes _____ No _____ State Issued _____

Are you a veteran? Yes _____ No _____ Are you a member of a Union? Yes _____ No _____

If yes, please Identify Local No. & location _____

Employment Desired & Availability - List Job(s) you qualify for:

1) _____ 2) _____ 3) _____

Total hour(s) available per week _____ Are you legally able to be employed in the U.S.? Yes _____ No _____

Hours Available	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

Do you have a HS Diploma or GED? Yes _____ No _____ Do you have a Technical Certificate or College Degree? Yes _____ No _____

Education (High School)

Name _____ Address _____

City _____ State _____ Zip _____ Phone _____

(College)

Name _____ Address _____

City _____ State _____ Zip _____ Phone _____

(Trade School)

Name _____ Address _____

City _____ State _____ Zip _____ Phone _____

RECENT EMPLOYMENT: (If not applicable, list work performed on a volunteer basis or personal references.)

(1) Employer _____ Address _____

City _____ State _____ Zip _____ Phone _____

Supervisor _____ Dates Worked: From _____ To _____

Work Performed _____

(2) Employer _____ Address _____
City _____ State _____ Zip _____ Phone _____
Supervisor _____ Dates Worked: From _____ To _____
Work Performed _____

(3) Employer _____ Address _____
City _____ State _____ Zip _____ Phone _____
Supervisor _____ Dates Worked: From _____ To _____
Work Performed _____

(4) Employer _____ Address _____
City _____ State _____ Zip _____ Phone _____
Supervisor _____ Dates Worked: From _____ To _____
Work Performed _____

Are you Computer Literate? Yes ___ No ___

List all computer programs used:

Word Processing _____
Data Bases _____
Desktop Publishing _____

Spreadsheets _____
Graphics _____
Other _____

Mark your Clerical Skills:

Typing, WPM _____ Shorthand, WPM _____ Medical Terminology Yes ___ No ___ Legal Terminology Yes ___ No ___

Do you possess the following?

Food Handler Certificate _____ First Aid/CPR _____ Haz-Mat or Haz-wopper _____ EMT or CNA _____ Certified Flagger _____

Other Certifications or Licensures: _____

I certify that the facts contained in this application are true and correct to the best of my knowledge. I have received a copy of the TERO Hiring Hall Procedures. I give TERO permission to verify employment and education background as specified in the application. This organization gives Indian Preference in Employment and Training in accordance with Title VII, Section 703 (1) and the Executive Order 11246 and the Shoshone-Bannock Tribal Employment Rights Ordinance. All TERO Referrals may be subject to pre-screening as a condition of their employment.

Signature _____ Date _____

TO BE COMPLETED BY TERO STAFF:

Date received ____/____/____ Received By: _____
Application Complete: Yes ___ No ___ Items on File: Tribal ID Resume DL CDL Other Certifications: _____
Application Incomplete Notice sent _____ Date entered into skills bank ____/____/____