



Job Application For the Penobscot Nation

Date Received: _____ Initials: _____

Personal Information

Last	First	MI	SSN#	Email
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Mailing Address	City	State	Zip	Home Phone	Mobile
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Previous names under which records can be found	Are you 18 or older? Yes No	Date of Birth
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Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? Yes No	If yes, please explain:
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Do you have a valid driver's license? Yes No	License#	State Issued
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Are you a U.S. Veteran? Yes No	If "yes", give discharge date and service branch.	Are you eligible to be lawfully employed in the United States? Yes No	If "no", indicate type of visa or immigration status
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What position are you applying for?	How did you hear about this position?
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Are you a member of a federally recognized Tribe? Yes No	*If so, which Tribe?	If hired, when would you be available to start?
*Please provide Tribal Member verification if member of Federally Recognized Tribe other than Penobscot		

Have you ever applied for work at the Penobscot Nation?	Yes No
Have you ever worked for the Penobscot Nation?	Yes No
If so, when and what position(s)?	

Please return all complete applications, and any additional materials, to the Human Resources Office by mail (Human Resources, 12 Wabanaki Way, Indian Island, ME 04468), email (Human.Resources@penobscotnation.org), or by Fax at (207) 817-7463.

Prior Work Experience (If attaching resume, please leave blank)

	Current or Most Recent	Prior	Prior
Employer			
Address			
City, ST, ZIP			
Telephone			
Name of Immediate Supervisor			
Dates of Employment	From To	From To	From To
Position/Job Title			
Brief Description of Duties			
Reason for Leaving			
May We Contact	Yes No	Yes No	Yes No

Education

	Name/Location	Number of Years Completed	Degree	Major
High School				
College/University				
Trade School				
Other Education or Training				

Special Skills

Please list any specific skills, certifications, or special licenses that are applicable to the position you are applying for

What is your experience level with office machines, computers/equipment, and software?

Please list other types of machines or equipment that you have experience with

Professional References

	Name	Relation	Title	Telephone Number
First Reference				
Second Reference				
Third Reference				

Please leave blank

Affidavit

I certify that the answer given by me to the foregoing questions and statements are true and correct without consequential omissions of any kind whatsoever. I agree that the Penobscot Nation Tribal Administration shall not be liable in any respect if my employment is terminated because of falsity of statements, answers, or omissions made by me on this application. I also authorize said companies, schools, or persons named above to give any information regarding my employment, character, and qualifications.

I hereby release said companies, schools or persons from all liability for any damage for issuing this information. I expressly waive all provisions of law prohibiting any physician, person, hospital, or other institution that has or may hereafter attend or furnish me with treatment from disclosing to the Penobscot Nation Tribal Administration any knowledge or information thereby acquired. I understand that any misleading or incorrect statements may render this application void, and if employed, would be cause for termination.

I understand that if employed, I have been hired at the will of the employer and that my employment may be terminated at will, at any time, pursuant to the Penobscot Nation Policies and Procedures Manual. I understand that if employed, the Penobscot Nation will maintain a personnel file on me.

In addition, I grant permission to the Penobscot Nation Tribal Administration to conduct a criminal background check, if needed, along with the personal reference and prior employment checks previously mentioned. I also agree to have a physical examination, which includes drug testing, at the expense of the Penobscot Nation, prior to my final selection for employment.

Print Full Name

Signature

Date

_____ x

_____ x

_____ x