

Application for Employment

Please read carefully before filling out this application

This application will be given every consideration, but its receipt does not imply that the applicant will be employed by Alluvion Communications.

Applications are current for 60 days, if you are still interested in a position after 60 days, a new application must be filed.

Please complete each section of this application.

If you have a resume, please attach to the application.

Name:		Date:			
Telephone:	E-mail Ac	dress:			_
Address: P.O. Box#/	Street		City	State	Zip Code
Are you, or have you been known by an	y other name?	Yes: No:			
If yes, please list name(s):					
Are you 18 years or older? Yes:	No:	Are you currently	employed?	Yes:	No:
On what date would you be able to w	ork?				
Are you an enrolled Gila River Commu	nity Member?	Yes: No:			
Are you a Native American of a federal	ly recognized tri	be? Yes:	No:		
If yes, which tribe?					
Are you a Non-Indian spouse of a com			No:		
Are you a Veteran with honorable disc	charge? Yes:	No:			
Do you reside on the Gila River Indian (Community? Y	es: No:			

Do you ave a curren	t application on file (within the last six m	nonths)? Yes:	No:				
If yes, provide last application date:								
Have you ever been employed here before? Yes: No:								
If yes, provide date:								
Position currently ap	oplying for:							
Check your availability to work: Full-time: Part-Time: Temporary:								
	Nigh	nts: Over 1	Гіте: Wee	kends:				
If any limitations to t	the above, please exp	olain:						
		Education						
	Name & Location	Years Attended	Date Graduated	Degree or Certifications				
High School								
riigii school								
College								
Trades, Business, Correspondence School, Other Training								
Trades, Business, Correspondence School, Other Training								
		General						
Subjects of special s	study or research wo	rk:						
•	you speak frequentl							
	, , ,							
U.S. Military or Navo	al Sarvicas:							
Current membership								
National Guard or R	eserves:							

Former Employers
List the last four employers, starting with the last one first:

Date, Month and Year	Name & Address of Employer	Salary	Positi	on R	eason for leaving
From: To:					
Give the nan Name	ne of three persons not re Telephon Number	e			least one year.
					·
Additional	skills or training re	levant to	the positi	on you're o	ipplying for:
Computer-related	skills:				
Computer-related	training received:				
Other relevant skills or training:					

Applicant Representations

Based on your work history, please describe your performance in the following areas:

Attendance:
Effectiveness in performing job duties:
Quality of work:
Interpersonal Skills:
Do you have any relatives employed here? Yes: No:
Name & Relationship:
Do you have an Arizona Driver's License? Yes: No:
Driver's License #:
Has your driver's license been suspended or revoked within the past three years? Yes: No:
If yes, please explain:
Are you willing to use your vehicle for work/business purposes? Yes: No:
Are you a U.S. citizen? Yes: No: If not, what is your status?
Note: The Immigration Reform and Control Act of 1986 require verification of an applicant's identity an eligibility for employment at the time of hire.
Have you been convicted of a felony within the last seven (7) years? Yes: No: (A conviction will not necessarily disqualify you from employment)
If yes, please explain:
In case of emergency, who should the company contact? Include name and telephone number:

Applicant's Statement

- 1. All information given by me in the application is true and correct. False information (misrepresentation or omission of information called for) in grounds for dismissal. I authorize investigation of all information contained herein and specifically authorize the employees and references to give you any information concerning me, and by doing so, release all persons from liability for any damage that may result from furnishing information to you.
- 2. In consideration for my employment, I agree to conform to the policies, practices, rules/regulation and guidelines, which may be changed from time to time. I further agree that my employment (and the terms and benefits provided to me) is not intended, and does not, constitute any contractual relations and is for no definite period of time and is terminable by myself or the Company with or without notice and with out cause. No oral statement or representation made either before or during employment can change or modify this non-contractual and at-will relationship.
- 3. In further consideration for my employment, I understand and agree that there are other forms, statements and provisions that have to be completed and agreed to, and those forms, statements, and provisions are part of this application and will be included within my employment records.

Signature of Applicant	Date

Preference in filling vacancies is given to qualified enrolled Gila River Community Members, other Indians, and non-Indian spouses of officially enrolled Community members in accordance with Tribal Employment Rights Office (T.E.R.O.) Ordinance (No. GR-02-09, Gila River Indian Community).

Alluvion Communications is an Equal Opportunity/Affirmative Action Employer, subject to Indian Hiring Preference.

Applicant:

Alluvion Communications employees, as a condition of employment, are required to be free from any measurable amounts of illegal drugs and/or alcohol or controlled substances. Because Alluvion Communications is committed to providing a drug-free working environment for our customers and employees, all offers of employment are contingent upon a drug screen which indicates that you are free from illegal drugs/alcohol or controlled substances. If you are offered a position with Alluvion Communications, you will be required to report within 24 hours, with photo identification, to take a drug test. Although certain security measures are taken in order to prevent cheating, your personal privacy in the collection process will be respected. The results of this test will be forwarded to the appropriate person at Alluvion Communications.

Consent and Release for Testing

I consent freely and voluntarily to the collection and testing of my urine. I hereby release and hold harmless Alluvion Communications its employees, designated representatives and agents, for any liability whatsoever arising from this request to furnish my specimens, the testing of my specimens, and decisions made concerning my application for employment or my continued employment based upon the results of these tests. I further authorize the confidential release of the laboratory results to Alluvion Communications or designee of Alluvion Communications at any future date as they are needed.

If I should test positive for prescription medication and there is no record of verification of prescriptions, I understand that my test results will be considered positive and that I will not be eligible for a position at Alluvion Communications.

I have read the instructions regarding the drug testing process and I understand all the requirements. I have read and understand the above.

l understand	the	Alluvion	Communications	drug	policy	and	l am	aware	of t	the	consequences	of	policy
violation.													

Signature of Applicant	Date