



Delaware Tribe of Indians

5100 Tuxedo Blvd.

Bartlesville, OK 74006

Phone: 918-337-6590 • Fax: 918-337-6591

Employment Application

APPLICANT INFORMATION															
Last Name						First				M.I.A		Date			
Street Address									Apartment/Unit #						
City					State					ZIP					
Phone					E-mail Address										
Date Available					Social Security No.					Desired Salary					
Position Applied for															
Are you a citizen of the United States?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>		NO <input type="checkbox"/>	
Have you ever worked for this company?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?							
Have you ever been convicted of a felony?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain							
Are you of Native descent?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, Tribe/Enrollment #							
Do any of your relatives or residents of your Home work for the Delaware Tribe or serve on The Tribal Council or Trust Broad?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, please list							
EDUCATION															
High School					Address										
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree					
College					Address										
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree					
Other					Address										
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree					
REFERENCES															
<i>Please list three professional references.</i>															
Full Name						Relationship									
Company						Phone									
Address															
Full Name						Relationship									
Company						Phone									

Address			
Full Name		Relationship	
Company		Phone	
Address			

PREVIOUS EMPLOYMENT			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date