LOCATION:

909 Packerland Drive Green Bay, WI 54303 **WEBSITE:** 

www.oneida-nsn.gov

**EMAIL:** 

HRD\_Jobs@oneidanation.org



A good mind. A good heart. A strong fire.

MAILING ADDRESS:
P.O. Box 365
Oneida, WI 54155-0365
FAX:
(920)496-7490
PHONE:

(920)496-7900

## **APPLICATION FOR EMPLOYMENT**

Answer all questions completely. Incomplete application considered.** A SEPARATE APPLICATION IS REQUIRED F			eceived after the o	closing date will not be			
How did you hear about this position?   Oneida Web P	age 🗌 Walk-i	n 🔲 Family or Frienc	I Other				
Transfer/Promotion Please check here to be consider consecutive year of service as a regular status employee at their supervisors that they applied. Supervisors may requ	and apply withir	the first five days of p	osting. Transfer/p	romotion applicants must notify			
Position Applying For: Job #:							
Last Name: F	irst Name:	Full Mic	Idle Name:	(Suffix ex. Jr, III)			
Gender: M F Address: (Circle One)			City:	State:			
Zip Code: County:		Phone #:	II #:				
Email Address:	Tribal Affiliation: (Oneida, etc): Enrollment #:						
NOTE: If an email address is provided, we will use this address for communication purposes.  Enrollment Status:							
EDUCATION INFORMATION High School or	# of Years	Diploma Earned					
Highest Grade Completed School Name & City, State	Completed	(HSED, GED, etc)					
College/Univ. Credits Earned or Highest Grade Completed School Name & City, State		Credits Completed	Major/Minor				
Graduate/ Professional Credits Earned School Name & City, State		Credits Completed	Major/Minor				
Additional Education and Dates, Specialized Training, Lic	cense, Certificat	ions, Apprenticeships,	etc:				
Summarize Special Skills:							



## Application for Employment Page 2

**Employment History**: (Provide the following information starting with your *present* position)

		state year process,					
From: Month/Year	To: Month/Year	Title:					
Employer:		Address:					
Phone #: Reason for Leaving:							
Summarize job duties/responsi	oilities:						
Employment History: (Provide t	he following information starting	with your <i>present</i> position)					
From:	To:	Title:					
Month/Year	Month/Year	nue.					
	Worth Tear	Address:					
Employer: Phone #:	Reason for Leaving:	Address:					
Summarize job duties/responsi	_						
Summarize job duties/responsi	omues:						
Employment History: (Provide t	he following information starting	g with your <i>present</i> position)					
From:	To:	Title:					
Month/Year	Month/Year						
Employer:		Address:					
Phone #:	Reason for Leaving:						
	•						
Summarize job duties/responsibilities:							
Employment History: (Provide the following information starting with your <i>present</i> position)							
From:	To:	Title:					
Month/Year	Month/Year						
Employer:	· ·	Address:					
Phone #:	Reason for Leaving:						
Summarize job duties/responsibilities:							



## Application for Employment Page 3

Che	eck the fo	llowing box	es if you are attachi	ng additi	onal d	ocuments.				
	Resume		Cover Letter		_ т	ranscript(s)		Letter(s)	of Referen	ce
	Copy of	Diploma	☐ Copy of License(s) ☐ Copy of Certification(s) ☐ Documentation of Enrollment Status							
		and check e h of the sta	_	stateme	ents. B	By checking each	box, you a	re verifyi	ng you hav	ve read, understand and
Disclaimer: The Oneida Nation will not be responsible for an incomplete application. Incomplete applications may be rejected. <i>Please note:</i> A separate application is needed for each position you are applying for.										
	I hereby certify that all statements within this application and all supporting documents are true, complete and correct to the best of my knowledge. I understand if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if employed, my employment may be terminated at any time.									
All information gathered by the Employee Background Investigation Department will be confidential. This application becomes the property of the Oneida Nation.										
I hereby authorize all persons and entities, to which this release is presented having information relating to or concerning me, To furnish any and all such information to any agent of the Oneida Human Resources and/or Oneida Gaming Commission for purposes of employment with the Oneida Nation.										
☐ I understand all gaming positions including Surveillance, MIS-Gaming, and Internal Security that I must ALSO apply for a Gaming license with the Oneida Gaming Commission.										
If hired, can you provide valid documentation establishing your identity and eligibility to be legally employed in the United States?:   YES NO  NO  (Proof of citizenship or immigration status is required upon										
	Note: A Social Security Card is not required to establish work eligibility, however, it must be presented upon hire for payroll purposes.									
Sig	Signature: Date:									
Social Security #:						Date of Bi	rth:			
Driver's License #/ID:			State		State:	CD	DL License:			
-		_	is application via ema Iditional documents s	-				-	-	or jump drive.
	ve you ev ne):	er used or a	are you otherwise kn	own by a	anothe	er name? If so, p	olease list a	ll such na	ımes (inclu	iding nickname and maiden
	A.K.A.			A.K.A.				A.K.A.		
	A.K.A.			A.K.A.				A.K.A.		