LOCATION:
909 Packerland Drive
Green Bay, WI 54303
WEBSITE:
www.oneida-nsn.gov
EMAIL:
HRD_Jobs@oneidanation.org

ONEIDA

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

MAILING ADDRESS:
PO Box 365
Oneida WI 54155-0365
PHONE:
(920)496-7900
FAX:
(920)496-7490

APPLICATION FOR EMPLOYMENT

Answer all questions completely. Incomplete applications may be rejected. **Any application received after the closing date will not be considered.**
A SEPARATE APPLICATION IS REQUIRED FOR EACH POSITION APPLIED FOR.

How did you hear about this position? ☐ Oneida Web Page ☐ Walk-in ☐ Family or Friend ☐ Other

☐ **Transfers/Promotion** Please check here to be considered as a transfer/promotion applicant. You must be a regular employee, have one consecutive year of service as a regular status employee and apply within the first five days of posting. Transfer/promotion applicants must notify their supervisors that they applied. Supervisors may require you to serve in current position until a replacement can be found.

Position Applying For: **Job #:**

Name: (First) (Last) (Full Middle) (Suffix ex. Jr, III)

Gender: ☐ M ☐ F Email Address: **Note:** If an email address is provided, we will use this address for communication purposes.

Address: City: State: Wisconsin

Zip Code: County: Phone #: Tribal Affiliation: (oneida)

Enrollment Status: Enrollment #:

(Applicant will be required to provide documentation of enrollment status to comply with the Oneida and Indian Preference Policy)

EDUCATION INFORMATION

	School Name & City, State	# of Years Completed	Diploma Earned (HSED, GED, etc)
High School or Highest Grade Completed			

	School Name & City, State	Date Received	Credits Completed	Major/Minor
College/Univ. Credits Earned or Highest Grade Completed				
Graduate/ Professional Credits Earned				

Additional Education and Dates, Specialized Training, License, Certifications, Apprenticeship, etc.

Summarize Special Skills

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EMPLOYMENT HISTORY: (Provide the following information starting with your current position)

From: Month/Year To: Month/Year Title:

Employer: Address:

Phone #: Reason for Leaving:

Summarize job duties/responsibilities:

From: Month/Year To: Month/Year Title:

Employer: Address:

Phone #: Reason for Leaving:

Summarize job duties/responsibilities:

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EMPLOYMENT HISTORY: (Provide the following information starting with your current position)

From: Month/Year To: Month/Year Title:

Employer: Address:

Phone #: Reason for Leaving:

Summarize job duties/responsibilities:

From: Month/Year To: Month/Year Title:

Employer: Address:

Phone #: Reason for Leaving:

Summarize job duties/responsibilities:

Check the following boxes if you are attaching additional documents.

☐ Resume ☐ Cover Letter ☐ Transcript(s) ☐ Letter(s) of Reference

☐ Copy of Diploma ☐ Copy of License(s) ☐ Copy of Certification(s) ☐ Documentation of Enrollment Status

Please read and check each of the following statements. By checking each box, you are verifying you have read, understand and agree to each of the statements.

☐ **Disclaimer**: The Oneida Nation will not be responsible for an incomplete application. Incomplete applications may be rejected. Please note: 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.

☐ Any reproduction of this release, whether photocopy, fax, or other process, shall be considered as valid as the original. Employers are hereby released from any and all liability which may result from furnishing such information.

☐ I hereby authorize all persons and entities to whom 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 that when applying for any gaming position, 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 **Note:** *A Social Security Card is not required to establish work eligibility, however, it must be presented upon hire for payroll purposes.*	*(Proof of citizenship or immigration status is requried upon employment.)*

Social Security #: _____ Date of Birth: _____

Driver's License #/ID: _____ CDL License: _____

Signature: _____ Date: _____

Please **type** your name in the signature field above if you are emailing this application.

If you are submitting this application via email; you will need to save this document to your desktop and/or jump drive. Applications and any additional documents should be emailed to ***HRD_Jobs@oneidanation.org****.*

Have you ever used or are you otherwise known by another name? If so, please list all such names (including nickname and maiden name):

A.K.A. _____ A.K.A. _____ A.K.A. _____

A.K.A. _____ A.K.A. _____ A.K.A. _____

Print Form