LOCATION:

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

www.oneida-nsn.gov

EMAIL:

 $HRD_Jobs@one idanation.org$



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

	oletely. Incomplete applicati IN IS REQUIRED FOR EACH PO		ny application	received after the clos	ing date will n	ot be considered.**
How did you hear ab	out this position?	Oneida Web Page	Twitter	Linkedin	Facebook	Other
consecutive year of	service as a regular statu sors that they applied. Su	s employee and apply	within the firs	t five days of postir	ng. Transfer/	1
Name:		_				
	(First)	(Li	Note:	(Full Middle) If an email ac	(Suffix ex. Jr, III) Idress is provided, we will	
Gender: M	F Email Address:					communication purposes.
Address:			City:		S	tate:
Zip Code:	County:	Phone #:		Tribal Affiliatio	on: (oneida)	
Enrollment Status:					Enro	ollment #:
(Арр	licant will be required to provide doc	umentation of enrollment status to	comply with the O	neida and Indian Preference	Policy)	
EDUCATION INFORM						
High School or Highest Grade Completed	School Name & City, Star	# of Years Completed			oma Earned D, GED, etc)	
College/Univ. Credits Earned or Highest Grade Completed	School Name & City, Stat	ր Date	Credits Completed	Major/Minor		
Graduate/ Professional Credits Earned	School Name & City, Stat	ր Date	Credits Completed	Major/Minor		
Additional Education	and Dates, Specialize	d Training, License, C	ertifications	, Apprenticeship,	etc.	-
Summarize Special S	kills					
·						

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EMPLOYMENT HISTORY: (Provide the following information starting with your <u>current</u> position) From: Month/Year To: Month/Year Title: Address: Employer: Reason for Leaving: Phone #: Summarize job duties/responsibilities: From: Month/Year Title: To: Month/Year Address: Employer: Phone #: Reason for Leaving: Summarize job duties/responsibilities:

Application For Employment Page 3

EMPLOYMENT HISTORY: (Provide the following information starting with your <u>current</u> position) From: Month/Year To: Month/Year Title: Employer: Address: Reason for Leaving: Phone #: Summarize job duties/responsibilities: From: Month/Year To: Month/Year Title: Employer: Address: Reason for Leaving: Phone #: Summarize job duties/responsibilities:

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Check the following boxes if you are attaching additional documents.										
2	Resume	Cov	er Letter		Transcript(s)		Letter(s) of Reference			
	Copy of Diploma	Сор	y 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/InCheck, Inc.										
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 and eligibility to be legally employed in the United States					YES NO		(Proof of citizenship or immigration status is requried upon employment.)			
	te: A Social Security Card is a nust be presented upon hire f			work ell	gibility, nowever,					
Social Security #:					Date of Birth:					
Driver's License #/ID:							DL 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	۸.		A.K.A.			A.K.A.				
A.K.A	۸.		A.K.A.			A.K.A.				