

upon employment.

Employment Application

Position(s):

First Name:	Middle Initial	Last Name	
Gender: Male Female			
Are you claiming American Indi of tribal ID or tribal enrollment o		_ No Applicar	its must attach copy
Are you claiming Veteran prefer and eligible to claim veteran's preference must include a current application for employment.	reference must attach Form	DD214. Claims for disab	led veteran's
Address:	City:	State:	ZIP:
Phone:	Email:		
How did you hear about this pos	ition?		
Desired Salary:	Date you can start:		
Are you willing to work overtim	e as necessary? Yes	No	
Is there anything that would prev	vent you from performing in	n a reasonable and safe m	anner the duties of
the position you have applied for	r: res No		
the position you have applied for Explain:	r: res No		
Explain:			
	f a crime? Yes No essarily be a bar from empl	———oyment. This information	
Explain: Have you ever been convicted of A conviction record will not nec	f a crime? Yes No essarily be a bar from empl	———oyment. This information	
Explain: Have you ever been convicted of A conviction record will not necfor job-related purposes and only	f a crime? Yes No essarily be a bar from emply to the extent permitted by	oyment. This information applicable law.	will only be used

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verification of the applicant identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization

Do you volunteer and/or contr	act with any other outside	e entities, organizations, gove	rnments	, groups?
Yes No If yes,				
Have you ever applied to or w	orked for NATIVE, INC.		_	
	o(s) in our emproyment a	and your rotationship to thom.		
Indicate any foreign language	and/or Indian languages o	or dialects you speak, read or	write.	
Record of Education School	. Begin with highest leve	l of education.	 	
School:		_		
Address:	City:	State:	_ZIP: _	
Course of Study:	Years Completed:	Did you Graduate?	Yes _	No
Diploma/Degree Received: _		Date Degree Obtained:		
School #2:				
Address:			_ZIP: _	
Course of Study:	Years Completed:	Did you Graduate?	Yes _	No
Diploma/Degree Received: _		Date Degree Obtained:		
School:		_		
Address:	City:	State:	_ZIP: _	
Course of Study:	Years Completed:	Did you Graduate? Yo	es	No
Diploma/Degree Received: _	d: Date Degree Obtained:			
Prior Employment Histor List in order of current employ		places of employment.		
Current or Most Recent Em	ployer Name #1:			
Are you currently employed h	ere? Yes No _			
Job Title:				
Address:			ZIP: _	
Supervisor:		Phone:		
Start Date:	End Date:	Rate of Pay:		

	nployer? Yes No			
Describe in detail the wo	ork you performed:			
Reason for Leaving:				
Employer Name #2				
	G.		7770	
		State:		_
		Phone:		
Start Date:	End Date:	Rate of Pay:		
May we contact this Em	nployer? Yes No			
Describe in detail the wo	ork you performed:			
Reason for Leaving:				
			_	
E-malovar Nama #3				
Job Title:			ZIÞ·	
Job Title:	City:	State:		
Job Title: Address: Supervisor:	City:	State: Phone:		
Job Title: Address: Supervisor: Start Date:	City: End Date:	State: Phone: Rate of Pay:		_
Job Title: Address: Supervisor: Start Date:	City: End Date: nployer? Yes No	State: Phone: Rate of Pay:		_

Reason for Leaving:				
Please include explanation	n of any gaps in employment:			
Summarize job related ski	lls and qualifications/certificates	::		
	Computer Programs:			
Office Equipment:				
Are there any other skills,	or abilities that you feel may be	helpful to us in cons	sidering your applic	ation?
Must submit a copy of	Military Status if you claim	serving in the U.	S. Arms Forces.	
Have you ever served in the	ne United States Armed Forces?	Yes No		
Must submit a copy of Indian preference.	Certificate of Degree of Ind	ian Blood <u>if you a</u>	re claiming Ame	rican
Tribal Affiliation	E	Enrollment No.:		
Three References is re- List two work-related refe	quired. rences and one personal reference	ce (EXCLUDING R	elatives)	
First and Last Name #1:				
Relationship:	Phone:	Date K	nown:	
Address:	City:	State:	ZIP:	
First and Last Name #2:				
Relationship:	Phone:	Date K	known:	
Address:	City:	State:	ZIP:	
First and Last Name #3:				
Relationship:	Phone:	Date K	Lnown:	
Address:	City:	State:	ZIP:	

Attachments:

- Certificate of highest degree obtained
- Completed Course Transcripts but only if you did not graduate from a degree program
- Training Certificates
- Cover letter
- Resume
- Other Documents, (e.g., copy of tribal enrollment, copy of veteran/military status)

Pre-Employment Statement Substance Testing Permission Form

I freely and voluntarily give my permission to submit to urinalysis and or other screening or tests as shall be determined by NATIVE, INC. under its administration of applicable regulations of the U.S. Department of Transportation (DOT) including 49 CFR Parts 40 and 382, NATIVE, INC. Policy and in substantial compliance with applicable state statues pertaining to a Drug Free Workplace, if any, in the selection process of all applicants for employment, for the purpose of determining the presence of, and content of, any and all of the following substances:

- Amphetamines
- Methamphetamine
- MDMA (Ecstasy)
- Cannabinoids
- Cocaine
- Phencyclidine (PCP)

- Opiates
- 6-Acetyl Morphine (Heroin)
- Codeine
- Morphine
- Alcohol

I also understand and acknowledge that I may be subject to non-DOT screening and testing under NATIVE, INC. Policy as set forth in the policy.

I further agree to and hereby authorize the release of the results of said tests to NATIVE, INC. and to NATIVE, INC.'s medical review officer and its Service Agents as provided in the policy.

I understand that a negative test is a pre-condition of employment with NATIVE, INC. and the refusal to submit to testing or a positive test result will result in the rejection of my application or the rescinding of a conditional offer of employment. I also understand that it is not the purpose of this screen or test to identify any disability I may have, and that pre-employment screening and testing activities are conducted in compliance with the ADA requirements applicable to NATIVE, INC. if any.

During the past two years, have you tested positive or refused to test an any pre-employment drug or alcohol test administered by an employer to which you applied, but did not obtain, safety sensitive transportation work covered by DOT agency drug and alcohol testing rules?

Yes No
I further agree that a reproduced copy of this form shall have the same force and effect as the original. I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.
Applicant Signature:

Pre-Employment Statement

I understand and agree that:

The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from NATIVE, INC. employment.

I understand that any offer of employment I may receive from NATIVE, INC. is contingent upon successful completion of the college's total pre-employment screening process, including NATIVE, INC. receiving references that it considers satisfactory.

If NATIVE, INC. decided to engage an investigative consumer reporting agency to report on my education or personal history, I authorize it to do so. I understand that it will do so if it has a business-related reason for doing so. If a report is obtained, I understand that upon written request, the name of the agency will be provided to me so that I may obtain information regarding the nature and substance of information contained in the report.

In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of NATIVE, INC. and understand that my employment and compensation can be terminated with or without cause or notice, at any time, at the option of either NATIVE, INC. or myself. I further understand that no manager or representative of NATIVE, INC., other than the President has any authority to enter into an agreement with me for employment for any specified period or to make any agreement different from or contrary to the foregoing. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me and by the individual designated above.

Applicant Signature:		

Important Note: Please submit completed form. Any areas left blank or proficiently unanswered or required documentation not submitted by the due date will prohibit this application from being processed. **Assistance?** Anyone needing assistance or accommodations during any part of the application or interview process please contact Tania Tschaekofske E-mail: <u>Tania@ndnadc.org</u> phone: (701) 751-0256.

TO APPLY:

- 1. Go to NATIVE, Inc. website: https://www.ndnadc.org/jobs and download and complete the employment application or stop by and pick up an employment application at the Native American Development Center.
- 2. Submit completed employment application, a copy of resume, copy of transcripts (if in current degree program) or a copy of highest degree/certifications obtained, and a copy of tribal enrollment (if Indian preference is claimed).

TO SUBMIT:

- 1. Drop off at the Native American Development Center: 2403 E. Thayer Avenue Bismarck, ND 58501.
- 2. Mail to: Native American Development Center c/o Human Resources: 2403 E. Thayer Avenue Bismarck, ND 58501.
- 3. Fax to: Attention: Tania (701) 751-0256
- 4. Scan/Email to Tania at Tania@ndnadc.org

This job description sole purpose is to define the general nature and level of work being performed by the person hired for this position and are not intended to be an exhaustive list of all duties, responsibilities, and skills required. All NATIVE, INC. staff are employees at will; therefore, NATIVE, INC. and each staff member are free to terminate that employment at any time and at either party's discretion, with or without cause. Management reserves the right to modify, add, or remove duties and to assign other duties as necessary. In addition, reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions of this position.

Equal Employment Opportunity

NATIVE, INC. does not discriminate on the basis of race, color, national origin, sex, genetics, religion, age or disability in employment or the provisions of services and complies with the provisions of the North Dakota Human Rights Act.

Office Use Only:	
Did this applicant submit all required documents by closing date: Yes	No
Date Received (application with required documents):	
Does the applicant meet minimum qualifications: Yes No	
Does the applicant meet the minimum experience requirements: Yes	No
Does this applicant move to an interview: Yes No	
Comments:	