



Picuris Pueblo
P. O. Box 127
Peñasco, New Mexico 87553
(575) 587-2519
FAX: (575) 587-1071

Application for Employment
(Please Print)

I. PERSONAL INFORMATION

Date: _____

Position Applying for: _____ Last 4 Social Security Number _____

FIRST NAME LAST NAME MIDDLE INITIAL

PRESENT ADDRESS

PERMANENT ADDRESS (If different from above)

TELEPHONE NUMBER

CELL PHONE NUMBER

TRIBAL MEMBER _____ PICURIS DESCENT _____ MEMBERS SPOUSE _____ NON-MEMBER INDIAN _____ NON INDIAN _____

1. Is there any information we need about your name or use of another name to check your work record?
Please specify? _____

2. Are you presently (or have formerly been) employed by Picuris Pueblo? Yes _____ No _____
If yes please state job title: _____ Dates of Service: _____ to _____
3. How were you referred for this job? _____
4. Have you ever served on active duty in the US Military? Yes _____ No _____
If yes: Branch of Service _____ Dates: _____ to _____
5. Are you of legal age to work? Yes _____ No _____
6. Do you have a legal right to be employed in the US? Yes _____ No _____ (If Yes Proof Is Required)

II. Work Availability

When will you be available to begin work? _____
Are you available for temporary work? Yes _____ No _____
Are you available for part time employment? Yes _____ No _____
Are you available for permanent employment? Yes _____ No _____
Can you work overtime without prior notice? Yes _____ No _____
Can you work on the weekend? Yes _____ No _____
Can you travel if required by this position? Yes _____ No _____

III. Skills and Experience

Can you type? Yes _____ No _____ wpm _____
Can you operate a computer? Yes _____ No _____
Do you have a valid driver's license? Yes _____ No _____
Can you speak and understand Tiwa? Yes _____ No _____
Do you have experience in grants management? Yes _____ No _____
Do you have good reading and writing skills? Yes _____ No _____
Additional skills that you feel will be helpful in the selection process: _____

IV. Educational History

High School: _____
School Name/Location # Years Completed Degree/Diploma/Date
College: _____
School Name/Location # Years Completed Degree/Diploma/Date
Tech Training: _____
School Name/Location # Years Completed Degree/Diploma/Date
GED/HSED Certification: Yes _____ No _____ Date: _____
Additional Education, Training and or Certifications: _____

V. References - Please do not include relatives or former employers.

1. Name _____ #Years Known _____ Telephone #: _____
Address _____ Occupation _____
2. Name _____ #Years Known _____ Telephone #: _____
Address _____ Occupation _____
3. Name _____ #Years Known _____ Telephone #: _____
Address _____ Occupation _____

IV. Employment Record

1. _____
Current or Recent Employer Name

Address

Dates Employed

Reason for Leaving

Position Held

Telephone

Manager/Supervisor

Final Wage/Salary

2. _____
Employer Name

Address

Dates Employed

Reason for Leaving

Position Held

Telephone

Manager/Supervisor

Final Wage/Salary

3. _____
Employer Name

Address

Dates Employed

Reason for Leaving

Position Held

Telephone

Manager/Supervisor

Final Wage/Salary

4. _____
Employer Name

Address

Dates Employed

Reason for Leaving

Position Held

Telephone

Manager/Supervisor

Final Wage/Salary

*Please note – We may contact all of the employers listed on this application unless you specifically exclude them below. Please list any employers you do not want us to contact and your reason for exclusion:

Employers Name

Reason

Employers Name

Reason

VI. Certification: I certify that the information given is correct and complete to the best of my knowledge and belief. I understand that knowingly making a false statement herein may be sufficient cause for ejection of this application or dismissal after employment.

Signature: _____ **Date:** _____