

BLACKFEET TERO OFFICE
INDIAN JOBS SKILLS BANK

PLEASE PRINT LEGIBLY

NAME: _____

ADDRESS: _____

CITY/STATE/ZIP CODE: _____

PHONE NUMBER: _____ CELL NUMBER: _____ MESSAGE: _____

MALE _____ FEMALE _____

ARE YOU 18 YEARS OR OLDER? _____ DATE OF BIRTH: _____

ARE YOU AN ENROLLED MEMBER OF THE BLACKFEET TRIBE: _____

ENROLLMENT NUMBER: _____

ARE YOU AN ENROLLED MEMBER OF A FEDERALLY RECOGNIZED
TRIBE? _____ TRIBAL AFFILIATION: _____

TRIBAL ENROLLMENT NUMBER: _____

(PLEASE PROVIDE ENROLLMENT VERIFICATION)

ARE YOU A VERERAN OF THE ARMED FORCES? _____

DRIVERS LICENSE INFORMATION

DO YOU HAVE A VALID DRIVERS LICENSE? _____ STATE: _____

REGULAR: _____ COMMERCIAL: _____ CLASS TYPE: _____

ENDORSEMENTS: _____ (PLEASE PROVIDE A COPY OF YOUR
CDL)

EMPLOYMENT DATA

LIST JOB SKILLS BY PREFERENCE:

1: _____ 2: _____ 3: _____

DATE: _____

CONTINUE ON REVERSE SIDE

EMPLOYMENT DATA CONTINUED

DO YOU HAVE YOUR OWN TRANSPORTATION? _____
DO YOU OWN YOUR OWN TOOLS? _____
WILL YOU RELOCATE? _____
WILL YOU TRAVEL? _____
ARE YOU PRESENTLY EMPLOYED? _____

EDUCATION AND TRAINING

HIGH SCHOOL: _____ DID YOU GRADUATE? _____
IF NO, HAVE YOU OBTAINED YOUR GED? _____ YEAR OBTAINED: _____
COLLEGE ATTENDED: _____
ADDRESS: _____ CITY/STATE/ZIP CODE: _____
DID YOU GRADUATE? _____ DEGREE: _____
VOCATIONAL/APPRENTICESHIP TRAINING _____
TYPE OF TRAINING: _____ CERTIFIED: _____
ARE YOU A MEMBER OF A CRAFT UNION? _____
ARE YOU A CERTIFIED FLAGGER? _____ YEAR OBTAINED: _____
(PLEASE PROVIDE A COPY OF YOUR TRAFFIC CONTROL CERIFICATION)

CERTIFICATIONS/LICENSE

JOURNEYMAN: _____ TYPE: _____
APPRENTICE: _____ TYPE: _____

REFERENCES

JOB-RELATED ONLY PLEASE

NAME: _____ POSITION: _____
COMPANY NAME: _____ PHONE: _____

NAME: _____ POSITION: _____
COMPANY NAME: _____ PHONE: _____

NAME: _____ POSITION: _____
COMPANY NAME: _____ PHONE: _____

WITH THE EXCEPTION OF PERSONAL DATA WHICH IF FULLY COVERED BY THE PRIVACY ACT,
ANY INFORMATION PROVIDED ON THIS QUESTIONNAIRE MAY BE USED TO ASSIST YOU TO FIND
SUITABLE EMPLOYMENT. IF YOU HAVE A COMPLETE RESUME, PLEASE ATTACH IT TO THIS
FORM. ALSO, BY SINGING BELOW AUTHORIZES US TO SEND YOUR RESUME TO PROSPECTIVE
EMPLOYERS.

APPLICANT SIGNATURE

DATE

WORK HISTORY

LIST THREE (3) EMPLOYERS, STARTING WITH THE MOST RECENT:

NAME OF EMPLOYER: _____
PHONE NUMBER: _____
ADDRESS: _____
EMPLOYED FROM: _____ **TO:** _____
JOB TITLE: _____
DUTIES: _____

NAME OF EMPLOYER: _____
PHONE NUMBER: _____
ADDRESS: _____
EMPLOYED FROM: _____ **TO:** _____
JOB TITLE: _____
DUTIES: _____

NAME OF EMPLOYER: _____
PHONE NUMBER: _____
ADDRESS: _____
EMPLOYED FROM: _____ **TO:** _____
JOB TITLE: _____
DUTIES: _____

WORK AND YEARS OF EXPERIENCE

	0-1	1-4	5-9	10+Yrs		0-1	1-4	5-9	10+Yrs
7. Welding					9. Industrial				
Aluminum					Fiber Optics				
Brazier					Air Rotary Drill				
Cast Iron					Asphalt Loading				
Fabricating					Asphalt Raking				
Gas					Drill Press				
Cutting Torch					Electronic				
Heliac					Other				
Mig									
Sheet Metal					10. Restaurant				
Soldering					Chef				
Stainless Steel					Prep Cook				
Tig					Waiting				
Other					Hostess				
					Cashier				
8. Construction					Bartender				
Inspector					Dishwasher				
Metal Roofing					Other				
Blueprint Reading									
Bluetip Grading					11. Motel				
Bricklaying					Front Desk				
Steel					Laundry				
Hod Carrier					Bellhop				
Laborer					Housekeeping				
Layout Carpentry					Sales Clerk				
Metal Stud					Other				
Pipe laying									
Pipeline					12. Office				
Plumbing					Secretary				
Remodeling					Clerk				
Road Construction					Accounting				
Siding Installing					Auditing				
Tile Roof					Bookkeeping				
Tying Rebar					Legal Terminology				
Wallpapering					Medical Records				
Other					Medical Claims				
					Medical Terminology				
					Medical Billing				
					Medical Coding				

WORK AND YEARS OF EXPERIENCE

	0-1	1-4	5-9	10+Yrs		0-1	1-4	5-9	10+Yrs
12. Office Cont.					16. Nursing Cont.				
Medical Relations					C.H.N.				
Human Services					C.N.A				
Other					Nurses Aide				
					Other				
13. Law Enforcement									
Police Officer					17. Miscellaneous				
Jailer					Counselor				
Investigator					Grant Writing				
Dispatcher					Security Guard				
Public Defender					Maintenance				
Judge					Compliance Officer				
Juvenile Officer					Teacher				
Other					Teachers Aide				
					Electrician				
14. Computer					Iron Worker				
Technician					Sheet Metal				
Programmer					Auto CAD				
Trouble Shooter									
Basic Skills					18. Farm and Ranch				
MS/DOS					Calving				
Quicken					Livestock				
Power Point					Vaccinating				
Access					Sterilization				
Scanning					Tractor				
Other					ATV				
					Cook				
15. Forestry					Fencing				
Sawyer/Faller A					Branding				
Sawyer/Faller B									
Sawyer/Faller C					19. Seismic				
Firefighter					Recording Line Help				
Crew Boss					Trouble Shooter				
Other					Line Driver				
					Vibs Operator				
16. Nursing					ATV Mecheanic				
LPN Ward					Staging Coordinator				
LPN Triage					Observers				
LPN Emergency					Other				

WORK AND YEARS OF EXPERIENCE

	0-1	1-4	5-9	10+Yrs		0-1	1-4	5-9	10+Yrs
20. Oil Rig					20. Oil Rig Cont.				
Driller					Surveying				
Rig Hand					Other				
Seismic									

I certify that all the above information is complete and true to the best of my knowledge and the Tribal Employment Rights Office can inquire for verification.

Signature

Date