



Nkwusm

Nkw'ucm x'w' qe Nuwéwłštn

Request for Employment

2022-2023

P.O. Box 5 • 72040 Bitterroot Jim Rd
 Arlee, Montana 59821
 Ph #: 406-726-5050 Fax #: 406-726-5051
Email-info@salishschool.org
 Online: www.salishschool.org

(INSTRUCTIONS: Please complete all portions of this application. If you require accommodation during the application process, including assistance in the completion of this application, please contact us. Include a resume & copies of documents and certificates.)

<i>Personal</i>				
<i>Last Name</i>	<i>First</i>	<i>Middle</i>	<i>Salish Name</i>	<i>Date:</i>
<i>Address</i>		<i>City, Zip</i>		<i>Phone Numbers:</i> <i>Home:</i> _____ <i>Work:</i> _____
<i>City, State, Zip Code</i>				<i>Cell:</i> _____ <i>Email:</i> _____
<i>Status Desired</i> <i>Full Time:</i> ____ <i>Part Time:</i> ____ <i>Temporary:</i> ____				<i>Social Security Number:</i>
<i>Are you willing to invest personal time to learning Salish? Explain.</i>				<i>Position Desired:</i>
				<i>Will you work overtime if asked?</i>
<i>Do you have relatives working for Nkwusm?</i>				<i>Pay Desired:</i>
<i>How did you find out about this position?</i>				<i>When are you available to begin?</i>

<i>Education</i>				
<i>School level</i>	<i>Name/Place of School</i>	<i>Did you graduate?</i>	<i>Degree/Diploma Certificate</i>	<i>Major</i>
<i>High School</i>				
<i>Business/Trade/Tech</i>				
<i>University/College</i>				
<i>Graduate</i>				

<i>Do you have a valid driver's license?</i>	<i>Do you have a commercial driver's license?</i>
<i>If no is there anything preventing you from getting a driver's license?</i>	

Employment History

Start with current or most recent employer.

1	Position Held:	Phone Number:	Position Held:
	Address:	Employed (month/year): From: _____ To: _____	
	Name of Supervisor:	Pay/Hour: Starting: _____ Ending: _____	
	Position: Explain your duties: _____ _____ _____	Reason for leaving: _____ _____ _____	

2	Position Held:	Phone Number:	Position Held:
	Address:	Employed (month/year): From: _____ To: _____	
	Name of Supervisor:	Pay/Hour: Starting: _____ Ending: _____	
	Position: Explain your duties: _____ _____ _____	Reason for leaving: _____ _____ _____	

3	Position Held:	Phone Number:	Position Held:
	Address:	Employed (month/year): From: _____ To: _____	
	Name of Supervisor:	Pay/Hour: Starting: _____ Ending: _____	
	Position: Explain your duties: _____ _____ _____	Reason for leaving: _____ _____ _____	

4	Position Held:	Phone Number:	Position Held:
	Address:	Employed (month/year): From: _____ To: _____	
	Name of Supervisor:	Pay/Hour: Starting: _____ Ending: _____	
	Position: Explain your duties: _____ _____ _____	Reason for leaving: _____ _____ _____	

<i>We may contact the employers listed above unless you indicate those you do not want us to contact.</i>	Do not contact:
	Employer(s): _____ Reasons: _____ _____

Certification

Please Read Carefully

- A. I certify that the information contained in this application is true and correct. I understand that any false or misleading statements or omissions regarding this application, whenever discovered, are grounds for disqualification from further consideration or for dismissal from employment.
- B. If employed, I agree to conform to the guidelines and policies of Nkwusm. I understand that **MY EMPLOYMENT IS AT-WILL AND CAN BE TERMINATED WITH OR WITHOUT ADVANCE NOTICE AT ANY TIME WITH REASON AND IN ACCORDANCE WITH THE POLICIES & PROCEDURES MANUAL**. If employed, I understand that the first 90 days is a probationary period and that I may be terminated with out cause.
- C. I understand and agree that only the Executive Director and Board of Directors of the Nkwusm has any authority to enter into any agreement to employ me for any specified period of time or to modify terms and conditions of my employment. I agree that such an agreement must be in writing and signed by the Executive Director, and I will not rely upon anything else.
- D. I understand and agree that the Nkwusm may make a full and complete investigation of my personal or employment history, and authorize any former employer, person, firm, corporation, school, government agency, or other entity to provide Nkwusm with any information (including fact or opinion) they may have regarding me. In consideration of the Nkwusm's review of this application, I release Nkwusm and all providers of any information from any liability which may arise as a result of furnishing and receiving this information, with the exception of any liability arising from a violation of the Fair Credit Reporting Act ("FCRA"). I understand and agree that if offered employment by Nkwusm, any such employment offer shall be dependent upon the receipt of satisfactory references as determined by Nkwusm. If employed by Nkwusm, I further authorize Nkwusm to provide truthful information (including fact or opinion) regarding my employment to any potential or future employer and release and waive any claims against Nkwusm for truthfully communicating any such information to a potential or future employer. *(Initial)*_____
- E. I understand and agree that I may be required to submit to drug testing and a complete post- offer medical examination as part of my application for employment. I also understand and agree that I may be required to submit to a complete medical examination during my employment with Nkwusm, provided that such examination is job related and consistent with business necessity. The cost of such examination will be paid by Nkwusm. I authorize the physician conducting the examination and any laboratory testing any specimen obtained by the physician or collection site to disclose the results of the examination and the laboratory test to Nkwusm in accordance with state and/or federal laws. Nkwusm will keep such results confidential and disclose the results only to persons who need to know or where required by law. Also, I agree to fully cooperate and provide Nkwusm with any additional consent(s) and/or release(s) as required by Nkwusm to investigate my employment application. *(Initial)*_____
- F. Nkwusm may inquire into and consider any criminal conviction record that you may have after it makes a conditional offer of employment to you. Nkwusm may withdraw a conditional employment offer if you have a criminal conviction record which bears a rational relationship to the duties and responsibilities of the position for which you are applying.
- G. I understand and agree that if offered employment by Nkwusm, I may be required to disclose military service information in accordance with law, and that any such employment offer shall be dependant upon the receipt of a satisfactory military record as determined by Nkwusm.
- H. I understand and agree that all of the foregoing terms and conditions will become part of my employment relationship with Nkwusm if I am employed by Nkwusm.

Signature: _____ Date: _____