



Utah Paiute Tribal Housing Authority

565 North 100 East • Cedar City, Utah 84721 • (435) 586-1122

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION:

LAST

FIRST

MIDDLE

PRESENT ADDRESS:

STREET

CITY

STATE

ZIP

PERMANENT ADDRESS:

STREET

CITY

STATE

ZIP

PHONE#:

EMAIL ADDRESS:

REFERRED BY:

EMPLOYMENT DESIRED

POSITION:

DATE YOU CAN START:

DESIRED SALARY:

ARE YOU EMPLOYED NOW?

IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER:

HAVE YOU EVER APPLIED TO THIS COMPANY?

WHERE:

WHEN:

EDUCATION	NAME & LOCATION OF SCHOOL	YEAR ATTENDED	DATE GRADUATED	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OF CORRESPONDENCE SCHOOL				

SUBJECTS OF SPECIAL OR RESEARCH WORK:

U.S. MILITARY OR

NAVAL SERVICE:

RANK:

PRESENT MEMBERSHIP IN

NATIONAL GUARD OR RESERVES:

ACTIVITIES OTHER THAN RELIGIOUS

(CIVIC, ATHLETIC, FRATERNAL, ETC.):

(CONTINUE ON OTHER SIDE)

FORMER EMPLOYERS: LIST BELOW LAST FOUR EMPLOYERS STARTING WITH LAST ONE FIRST.

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

REFERENCES: TWO PERSONS NOT RELATED TO YOU WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			

NAME OF PERSON TO CONTACT IN CASE OF EMERGENCY: _____

RELATIONSHIP: _____ PHONE #: _____

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NOT DEFINITE PERIOD.

SIGNATURE: _____ DATE: _____

A RESUME MUST BE SUBMITTED WITH YOUR APPLICATION

FOR OFFICE USE ONLY TO BE COMPLETED BY SUPERVISOR

HIRE DATE: _____

POSITION: _____

SALARY: _____

OTHER: _____

REMARKS: _____



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Background Check Authorization **and Release of Information**

DISCLOSURE REGARDING USE OF CONSUMER REPORT **AS PART OF BACKGROUND INVESTIGATION**

The Paiute Indian Tribe of Utah (“PITU” or “Tribe”) may obtain information about you from **NationSearch, LLC**, a consumer reporting agency, for employment purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” (“ICR”) which may include information about your character, general reputation, personal characteristics, and/or mode of living and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history (State and Federal records), social security verification, address trace, motor vehicle records (“driving records”), verification of your education or employment history, or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. The scope of this notice and authorization is all encompassing, however, allowing the Tribe to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment, volunteer work or other service to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

The Tribe cannot provide you with a copy of the consumer report received from NationSearch. **You should contact NationSearch, LLC, 11184 Huron St. #13, Northglenn, CO 80234, (800) 827-9550, directly for more information and/or to request a copy of the consumer report obtained by the Tribe.**

I **understand** that a background check is a condition of employment, volunteer work or other service with the Paiute Indian Tribe of Utah (PITU or Tribe), and that I may be subject to recurring background checks in accordance with tribal and/or federal law. By signing below, I authorize PITU to conduct any necessary background check(s) for the purpose of evaluating my qualifications for employment or to serve the Tribe in another capacity, and consent to the release of background information to the Tribe as described in this Authorization.

I **agree** that the background check(s) may include an inquiry into my records, including but not limited to my educational background, license(s)/certification(s), prior place(s) of employment, job performance, social security, criminal, civil, credit, and Department of Motor Vehicle records.

I **acknowledge** that the background check(s) may be based on a fingerprint check obtained by a law enforcement officer and on other identifying information I have provided, and may be conducted through the Federal Bureau of Investigation and/or the state criminal history repository of each state that I lived, and may also include a check of county, tribal, and local records.

I **understand** that the Tribe currently uses a consumer reporting agency, **NationSearch LLC**, to obtain background check information. I have read and understand the DISCLOSURE REGARDING USE OF CONSUMER REPORT AS PART OF BACKGROUND INVESTIGATION that appears at the top of this Authorization and Release. In addition, I understand that I may request a copy of the SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT from the Tribe. I authorize the obtaining of “consumer reports” and/or “investigative consumer reports” by the Tribe at any time after receipt of this authorization and throughout my employment, volunteer work or other service, if applicable.

I **authorize**, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, credit reporting agency, former or current employer, and/or other individuals and organization to provide any and all background information requested by the Tribe, NationSearch, LLC, and/or another outside organization acting on behalf of the Tribe.

I **acknowledge** that I am providing this information under penalty of perjury. I **understand** that if I provide false information to the Tribe, I am subject to discipline, including termination of employment or my relationship with the Tribe, and may be subject to criminal prosecution.

I **acknowledge** that the results of any background check shall become part of my personnel or other file, and that all information shall be confidential and maintained in accordance with the rules and regulations of the federal Privacy Act, 5 U.S.C. § 552a.

I **agree** that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be as valid as the original.

First, Full Middle Name, Last Name (Please print) Signature _____ / ____ / ____
Date

Current Address City State Zip Code

(____) _____ - _____ _____ / ____ / ____ _____ / ____ / ____ _____ _____
Phone Number Social Security # Date of Birth Driver’s License # State

Other Names Used (including Maiden) _____

Previous Cities/States of Residence _____

Reason for Background Check (e.g. employment, independent contractor (list specific program, clinic or function), band representative (list Band/committee type), etc.

FOR COMPLIANCE WITH THE INDIAN CHILD PROTECTION AND FAMILY VIOLENCE PREVENTION ACT OF 1990:

Have you ever been arrested for or charged with a crime involving a child? **Yes** _____ **No** _____

If “**YES**,” provide the date, explanation of the violation, outcome of the arrest or charge, and place of occurrence. If multiple arrests or charges, please provide responses regarding each charge separately. (Attach separate sheets if necessary.)

Have you ever been found guilty of, or entered a plea of nolo contendere (no contest) or guilty to, any felony or misdemeanor offense under federal, state or tribal law involving: a crime of violence; a sexual offense, including assault, molestation, exploitation, sexual contact or prostitution; or a crime against a person? This includes, but is not limited to, assault and domestic violence offenses. If you are not sure whether an offense qualifies, please mark “**YES**” and provide an explanation. **Yes** _____ **No** _____

If “**YES**,” provide the date the offense occurred, the date of the disposition, an explanation of the violation, and place of occurrence. If multiple offenses, please provide responses regarding each offense separately. (Attach separate sheets if necessary.)

Previous employment, charges/convictions information:

During the last ten (10) years, were you fired from any job, did you quit after being told you would be fired, and/or did you leave by mutual agreement? If so, please provide details and specify the employer. (Attach separate sheets if necessary.) *Only required for employment.*

Have you ever been charged with, and/or convicted of any felony violation under federal, state or tribal law? (Attach separate sheets if necessary.)

Are there any charges for any violation of federal, state, or tribal law currently pending against you? (Attach separate sheets if necessary.)

Print Name

Signature

Date

/ /