



NICWA

National Indian Child Welfare Association

APPLICATION FOR EMPLOYMENT

THANK YOU FOR CONSIDERING THE NATIONAL INDIAN CHILD WELFARE ASSOCIATION (NICWA) IN YOUR JOB SEARCH. NICWA IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF SEX, AGE, RACE, COLOR, RELIGION, NATIONAL ORIGIN, MENTAL OR PHYSICAL DISABILITY, SEXUAL ORIENTATION, POLITICAL AFFILIATION, MARITAL OR VETERAN STATUS.

COMPLETE ALL QUESTIONS and SIGN YOUR NAME ON LAST PAGE

PERSONAL INFORMATION

DATE:

NAME:

Last First Middle
ADDRESS:

Number Street Apt.

City State Zip Code
TELEPHONE:

Work Home/Message Mobile

POSITION

POSITION APPLIED FOR:

DATE AVAILABLE TO START:

GENERAL INFORMATION

Are you 18 years of age or older? Yes No

Can you provide proof of identity and eligibility for employment in the United States? Yes No

Have you ever been employed or attended school using any other name? Yes No

If yes, please explain:

Have you ever applied for employment or have you ever been employed by or volunteered with NICWA? Yes No

If yes, please list positions applied for and/or dates when an employee or volunteer of NICWA.

Are you able to perform the primary duties of the job as outlined in the job posting, with or without reasonable accommodation? Yes No

If no, please explain:

Do you have any employment restrictions resulting from a non-compete or confidentiality agreement? Yes No

If needed, please use the space below to provide any additional information (e.g., additional employers, explanation regarding periods of time not worked, etc.)

EDUCATION and MILITARY TRAINING				
	Name of School City and State	Major Subjects or Types of Courses	Last Year Completed	Did You Graduate?
College or University			No. of years	Degree Received
Vocational/ Technical School			No. of years	Degree/Certificate Received
High school/ GED			Grade completed 9 10 11 12	
Other			Amt. of time	Certificate Received
Military				
Software Applications/Skills:				
Other Skills:				
Licenses and Certifications relevant to the position you are applying for (include ID numbers and expiration dates):				

EMPLOYMENT RECORD

Please begin with your most recent employment. Provide an accurate, complete full-time and part-time employment record, including volunteer activities that are related to the position you are applying for.

May we contact your current employer?	Yes	No	
Employer:	From (MM/YYYY):	To (MM/YYYY):	
Address:	Telephone number:		
Job title:	Supervisor's name:		

Describe your duties and responsibilities:

Reason for leaving:

Employer:	From (MM/YYYY):	To (MM/YYYY):
Address:	Telephone number:	
Job title:	Supervisor's name:	

Describe your duties and responsibilities:

Reason for leaving:

Employer:	From (MM/YYYY):	To (MM/YYYY):
Address:	Telephone number:	
Job title:	Supervisor's name:	

Describe your duties and responsibilities:

Reason for leaving:

OTHER

Please provide any additional information that you would like us to know when considering your application for employment. Include any relevant skills, special trainings, honors, awards, fellowships, publications, memberships, etc.

PROFESSIONAL REFERENCES

List 3 persons not related to you, and that would have definite knowledge of your qualifications and suitability for the position you are applying for. Please list current contact information.

	Name	Phone Number and Email	Occupation
1			
2			
3			
4			
5			
6			

PLEASE READ CAREFULLY BEFORE SIGNING _____

I certify that I have answered the above questions truthfully and have not withheld any information relative to my application. I understand that any falsification, misrepresentation, or omission, as well as any misleading statements or omissions of the application information, attachments, and supporting documents generally will result in denial of employment or immediate termination, if discovered after hire.

I authorize NICWA to investigate whether I have a criminal record of convictions, and, if so, the nature of such convictions and all the surrounding circumstances of the conviction. NICWA has advised me that any criminal background check will focus on convictions, and that a criminal record will not necessarily disqualify me from employment.

If hired, I recognize the rules and policies of NICWA. I understand that my employment and compensation can be terminated at any time, with or without cause, and with or without notice, at the option of NICWA or myself. I understand that NICWA's executive director is the only person who will ever have the authority to create any other terms of employment and/or to enter into any employment contract and that all such contracts must be in writing and signed by both parties. However, I also understand that unless otherwise stated in an employment contract, the company may change, withdraw and interpret other policies (including wages, hours and working conditions) as it deems appropriate.

I understand and acknowledge that I may be required to submit to a physical examination, including a drug test. Additionally, I hereby authorize the release of the results of such an examination to NICWA for their use in evaluating my suitability for employment. Further, I release the examining facility and NICWA from any and all liability, and from any damage that may result from the release of such information.

I acknowledge reading and understanding the foregoing statements.

Applicant signature

Date

Please submit this application with your cover letter, resume, and any other required documents if applicable to:

National Indian Child Welfare Association
Attn: Human Resources
5100 SW Macadam Avenue, Suite 300
Portland, OR 97239
[Email: hr@nicwa.org](mailto:hr@nicwa.org) Fax: 503-222-4007