Please Read Before Submitting Application

There are four ways to submit an employment application to the Sac and Fox Nation Human Resources Department

1. The form can be mailed to:

Human Resources 920963 S. Hwy 99 Stroud, OK 74079

- 2. The form can be dropped off at the Administration Building in Stroud, OK or at the Shawnee Multi-Purpose Center in Shawnee, OK.
- 3. The form can be faxed to 918-968-3240.



Date received by SFN	
Vacancy Announcement #	

Sac and Fox Nation Application for Employment

l questions	must be a	inswered carefully and compl	etely. If you have a resum	e, please attach it to this applicat	tion. PLEASE TYPE OR PRINT.
Position I	Desired			Salary Desire	d
Available	to wor	k 🛘 Full-Time	☐ Part-Time	Date Available	
ersonal [Data				
Name					
If you ha	ive eve	r worked under a diffe	erent name, please	provide the name(s) and	dates employed under this name(s):
Address					
1	Number	and Street			
	City			State	Zip
*Teleph	one <u>(</u>)	*Email Add	lress	
Are you:					
Yes	No	Legally eligible for emplor	yment in the United Sta	tes?	
Yes	No	Enrolled member of a fed	lerally recognized Native	e American Tribe? If yes, list tr	ribe:
Yes	No	Currently have any relativ	ves working for the SFN.	If yes please provide name, p	osition title, and department
Yes	No	A previous applicant?			
Yes	No	A previous employee? If	es, what position did yo	ou hold?	
Yes	No				
Yes	No			chool attended	
Yes	No	not include juvenile conv	ctions) Conviction will r		embezzlement, fraud, or moral turpitude? (Do from employment consideration, but the nature
*If yes, list	offense			. , , , , , , , , , , , , , , , , , , ,	

Post High School Education (amount of education considered necessary will vary according to the job applied for)

Institution Name	Location	From	То	Degree	Major

Nork Experie	nce (Start with mos	st recent position a	nd list each employer for the	past five (5) years. Use	e supplemental page, if necessary).
Present/Last E	mployer			Type of Business	
Address				Telephone Numbe	er
Start Date	Leave Date	Last Salary	Reason for Leaving		
Job Title		Supervisor and	 Title		May we contact?
Description of	Duties				
Present/Last E	mployer			Type of Business	
Address				Telephone Numbe	er
Start Date	Leave Date	Last Salary	Reason for Leaving		
Job Title		Supervisor and	 Title		May we contact?
Description of	Duties				
·					
Present/Last E	mnlover			Type of Business	
Address				Telephone Number	ar.
Start Date	Leave Date	Loct Colony	December Leaving	relephone Number	
	Leave Date	Last Salary	Reason for Leaving		1.4
Job Title		Supervisor and	i litte		May we contact?
Description of	Duties				
dditional Chi	ille ou Evperiones				
	ills or Experience		icenses or certificates you have	e received:	
	, p		,		
List your comp	uter and software kr	nowledge:			
U.S. Military:	Branch of Servi	ra:	Rank of Discharge:	Date	es of Service:
	lease read the follow			Date	3 01 Jet vice.
				, if any) is true and comp	plete to the best of my knowledge. I also
	t falsified information of the matter of the	-	ns may disqualify me from furthe	er consideration for emp	loyment and, if employed, may result in
I understand tha	at any employment with	h Sac and Fox Nation i	is for an indefinite term and may b	be terminated, with or wi	thout cause, at any time at the discretion
	npany or myself. I unde zation to work in the U		of work will be set and may be cha	anged by the Nation. I und	derstand that upon being hired, I will have
schools, my curr	ent employer (if applic	able), and previous er		d in this application (and	ed herein and I authorize any person(s), accompanying resume, if any), to provide
	at Sac and Fox Nation re Il preclude my applicat	_		rug tests. I understand tha	at a positive drug test or refusal to submit
Sac and Fox Nat	ion Personnel Policies	and Procedures. EQU		ian preference, considera	Eligibility will be determined from current ation will be made without regard to any
Signed				Date	
·				-	



SAC AND FOX NATION

920883 S HWY 99 Bldg A – Stroud, Oklahoma 74079- Telephone (918) 968-3526 – Fax (918) 968-3240

REQUEST FOR BACKGROUND CHECK

Name:(LAST)			DOB:
		(MIDDLE)	
Race:		Sex:	SSN:
Place of Birth:			
	(CITY)	(STATE)	(COUNTY)
Current Address:			
	(CITY)	(STATE)	(COUNTY)
Drivers' License #:		Sta	te Issuing License:
Email Address:			
Alias/Other Names U	Ised:		
		y? Yes:	_ No:
If yes, please explain	>><<<	<<>>>>>	:<>>>>
If yes, please explain	: >><<<<>>>>	<<>>>>><<<	<<>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>
If yes, please explains <>>>>>>> rize the complete release may have. I hereby autherson having personal kerson having person having personal kerson having person havin	:	<>>>>><<< KGROUND AUTHORIZAT taining to me in which an ir y present or former employe	S<>>>><<<<>>>>>> ION Idividual, company, firm, corporation or public
If yes, please explain Complete release may have. I hereby authors on having personal keation in their possession rize Sac and Fox Nation for Sac and Fox Nation harrows.	>><<<>>>>>> Page of these records per norize and request any nowledge of me to full to make all necessary mless from any and all	<<>>>>><< EKGROUND AUTHORIZAT Taining to me in which an ir y present or former employernish the Sac and Fox Nation and appropriate investigation	ic>>>>>cc>>>>>>>>>>>>>>>>>>>>>>>>>>>>>
If yes, please explain Complete release may have. I hereby authors on having personal keation in their possession rize Sac and Fox Nation for Sac and Fox Nation harrows.	>><<<>>>>>> Page of these records per norize and request any nowledge of me to full to make all necessary mless from any and all	CCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC	ic>>>>>cc>>>>>>>>>>>>>>>>>>>>>>>>>>>>>

DATE