



Kiowa Tribe

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TRIBAL EMPLOYMENT RIGHTS OFFICE

Email: bthompson@kiowatribe.org

Job Skills Bank Application



TERO

The Kiowa Tribe established the Tribal Employment Rights Ordinance (TERO) in 1996 to have regulatory authority over non-governmental employment operating within the boundaries of the KCA (Kiowa, Comanche, Apache) lands.

Information provided on the Job Skills Bank Application will be used for TERO referral purposes to better match potential job seekers with jobs that may be suited or related to the

desired field and/or experience of the application. This application does not replace the Kiowa Tribe Employment Application.

Required Documents:

Social Security Card

Tribal ID/CDIB

Valid ID/Valid Driver's License (if applicable)

INDIVIDUALS MUST UPDATE THEIR JOB SKILLS BANK APPLICATION EVERY SIX (6) MONTHS TO STAY ACTIVE FOR REFERRAL.

Personal Information

Name	_____	_____	_____	_____
	Last	First	MI	Date
Mailing Address	_____	_____	_____	_____
	Street	City	State	Zip Code
Phone (____)	_____	Phone (____)	_____	Email _____
Gender:	Male	Female	DOB: _____	Social Security # _____
Are you a member of the Kiowa Tribe?			Yes	No
Are you a member of another recognized Indian Tribe or Band?			Yes	No
If yes, give name of Tribal/Affiliation:	_____			
If the job requires, do you have a valid Driver's License?			Yes	No
Driver's License #	_____	Type _____	State _____	
Are you willing to commute to work? If yes, how far?	_____			
Do you have available transportation to work?			Yes	No
Do you have physical limitations that may impair you job performance?				
	If yes, please explain: _____			
	If yes, please describe what can be done to accommodate your limitations: _____			
Have you ever been convicted of a felony?			Yes	No
	If yes, date of conviction: _____			

Education and Training

Please submit all applicable transcripts and/or Certifications

	Location	Years Attended	Graduation/Credential
High School			
Trade/Technical School			
College			

Union

Are you a union member? Yes No If yes, give union local #: _____

Please list skills, licenses, or certificates that may be job-related or that would be beneficial to a job site:

What type of employment status do you prefer? Full-time Part-time Permanent Temporary

Date(s) available to work: _____ Are you currently employed? Yes No

PLEASE FILL IN THE TOTAL MONTHS OR YEARS THAT YOU HAVE WORKED IN EACH FIELD

Equipment Operator:

Asphalt Paver	MOS _____	YRS _____
Back Hoe	MOS _____	YRS _____
Bulldozer	MOS _____	YRS _____
Crane	MOS _____	YRS _____
Dump Truck	MOS _____	YRS _____
Excavator	MOS _____	YRS _____
Forklift	MOS _____	YRS _____
Front Shovel	MOS _____	YRS _____
Grader	MOS _____	YRS _____
Loader	MOS _____	YRS _____
Pile Driver	MOS _____	YRS _____
Roller	MOS _____	YRS _____
Scraper	MOS _____	YRS _____
Screed	MOS _____	YRS _____
Operator	MOS _____	YRS _____
Skidder	MOS _____	YRS _____
Tractor	MOS _____	YRS _____
Truck Driver	MOS _____	YRS _____

Other:

Flagger	MOS _____	YRS _____
Laborer	MOS _____	YRS _____
Logging	MOS _____	YRS _____
Mill Worker	MOS _____	YRS _____
Surveyor	MOS _____	YRS _____
Traffic Control	MOS _____	YRS _____
Supervisor	MOS _____	YRS _____
Warehouseman	MOS _____	YRS _____

Food/Beverage Service:

Banquets	MOS _____	YRS _____
Bartender	MOS _____	YRS _____
Busser	MOS _____	YRS _____
Cook	MOS _____	YRS _____
Cashier	MOS _____	YRS _____
Server	MOS _____	YRS _____
Butcher	MOS _____	YRS _____

Building Trades:

Asbestos Removal	MOS _____	YRS _____
Brick & Stone Mason	MOS _____	YRS _____
Bridge	MOS _____	YRS _____
Cabinet Installation	MOS _____	YRS _____
Carpenter	MOS _____	YRS _____
Cement Mason	MOS _____	YRS _____
Cement Form Setter	MOS _____	YRS _____
Cement Finisher	MOS _____	YRS _____
Concrete Cutting	MOS _____	YRS _____
Drywall	MOS _____	YRS _____
Electrician	MOS _____	YRS _____
Fence Builder	MOS _____	YRS _____
Finish Carpenter	MOS _____	YRS _____
Flooring	MOS _____	YRS _____

Gaming/Hospitality:

Auditor	MOS _____	YRS _____
Accounting	MOS _____	YRS _____
Cage Operations	MOS _____	YRS _____
Dealer	MOS _____	YRS _____
Players Club	MOS _____	YRS _____
Host	MOS _____	YRS _____
Human Resources	MOS _____	YRS _____
Maintenance	MOS _____	YRS _____
Purchasing/Receiving	MOS _____	YRS _____
Surveillance	MOS _____	YRS _____
Security	MOS _____	YRS _____
Slots	MOS _____	YRS _____
Valet Driver	MOS _____	YRS _____
IS/IT	MOS _____	YRS _____
Housekeeping	MOS _____	YRS _____

Clerical:

10-Key Machine	MOS _____	YRS _____
Microsoft Word	MOS _____	YRS _____
Microsoft Excel	MOS _____	YRS _____
Bookkeeper	MOS _____	YRS _____
Filing	MOS _____	YRS _____
Receptionist	MOS _____	
Typing WPM	_____	

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Skills #1	(List skills you possess for each section, such as: Laborer, Equipment Operator, Maintenance, Grounds keeping, Clerical, etc.)			
Journeyman Years/exp. ____	Apprentice Years/exp. ____	Trainee Years/exp. ____	Helper Years/exp. ____	Other (explain) _____
Do you have tools and other equipment required by your trade?			Yes ____	No ____
If no, what necessary tools are needed? _____				
Do you have a current license or certification if one is required for this skill?			Yes ____	No ____
If Yes, provide state, date of issue, expiration date and number: _____				
Work Performed: _____				
Work Reference: Name/Title _____		Business _____		
Address _____		Phone _____		

Skills #2	(List skills you possess for each section, such as: Laborer, Equipment Operator, Maintenance, Grounds keeping, Clerical, etc.)			
Journeyman Years/exp. ____	Apprentice Years/exp. ____	Trainee Years/exp. ____	Helper Years/exp. ____	Other (explain) _____
Do you have tools and other equipment required by your trade?			Yes ____	No ____
If no, what necessary tools are needed? _____				
Do you have a current license or certification if one is required for this skill?			Yes ____	No ____
If Yes, provide state, date of issue, expiration date and number: _____				
Work Performed: _____				
Work Reference: Name/Title _____		Business _____		
Address _____		Phone _____		

Skills #3	(List skills you possess for each section, such as: Laborer, Equipment Operator, Maintenance, Grounds keeping, Clerical, etc.)			
Journeyman Years/exp. ____	Apprentice Years/exp. ____	Trainee Years/exp. ____	Helper Years/exp. ____	Other (explain) _____
Do you have tools and other equipment required by your trade?			Yes ____	No ____
If no, what necessary tools are needed? _____				
Do you have a current license or certification if one is required for this skill?			Yes ____	No ____
If Yes, provide state, date of issue, expiration date and number: _____				
Work Performed: _____				
Work Reference: Name/Title _____		Business _____		
Address _____		Phone _____		

Training Interests:

- | | | |
|---|--|---|
| <input type="checkbox"/> Building Trades/Apprentice | <input type="checkbox"/> Construction | <input type="checkbox"/> Heavy Equipment |
| <input type="checkbox"/> Caregiver | <input type="checkbox"/> Early Childhood Education | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Electrician | <input type="checkbox"/> HVAC |
| <input type="checkbox"/> CDI Driver | <input type="checkbox"/> Facilities Maintenance | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Cement Mason | <input type="checkbox"/> Flagging | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Food Service | <input type="checkbox"/> Security Officer |
| <input type="checkbox"/> Commercial Baking | <input type="checkbox"/> Gaming Dealer | <input type="checkbox"/> Welding/Metal Worker |
| <input type="checkbox"/> Commercial Cooking | <input type="checkbox"/> Gaming Technician | <input type="checkbox"/> Other (Please Specify) |
| <input type="checkbox"/> Computer Skills | | |

Emergency Contact Information:

Name	Relationship	Phone #

Attestation of Compliance

The information provided in this application will be entered into the TERO skills database and used to match your education skills, training, and experience to available TERO positions. Receipt of your application does not imply or guarantee that you will be employed. Your application and entry into the TERO database will provide you opportunities to be notified and considered for training and other developmental resources that TERO may make available in the future.

I understand that if TERO is able to locate work for me and I quit the work without notice, or I am terminated for cause from that employment, I will be placed on a probationary status and will not be eligible for supportive services or referral assistance from TERO for a period of one (1) year. I may still update my information with TERO and use the other resources TERO has available.

I certify that facts contained in this form are true and correct to the best of my knowledge. I authorize investigation of all statements and give permission to the TERO Office when referring my name, qualifications and personal information to any employer for the possible recruitment of employment and/or throughout my job search.

Signature	Date

Date Received _____ / _____ / _____		Received By: _____	
Application Complete?	Yes No	Items on File:	Tribal ID Resume Certifications
Verification of Information by: _____		Date: _____	