



Tiospa Zina Tribal School Employment Application

#2 Tiospa Zina Drive
PO Box 719
Agency Village, SD 57262
Phone # 605-698-3953
Fax# 605-698-7686
www.tzts.us

Dear Applicant:

The following information is required by the Sisseton Wahpeton School Board. If you do not provide the required information, your application will be considered incomplete.

1. Tiospa Zina Tribal School application
2. Verification of high school or GED completion
3. Three (3) letters of recommendations from previous employers/co-workers; if not previously employed, you may submit recommendations from someone having knowledge of your skills and abilities regarding the position for which you are applying.
4. Copy of teacher certificate (If applicable)
5. Placement and college credentials (Official)
6. Verification of Indian (Verification Form BIA-4432) and/or Veteran's Preference (If applicable)
7. CII – Criminal and Corporate Investigations, Inc. Background Check Forms

GENERAL INFORMATION:

Position(s) applying for (list up to 3): _____

Last Name	First Name	Middle Initial	Over 18? (Yes/No)
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P.O. Box	Street	City	State	Zip
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Telephone #: Home and Emergency	Driver's License
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Tribal Affiliation (If Applicable)	Enrollment Number	SWO District
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During the last 5 years have you ever been fired from any job for any reason? ___ Yes ___ No
If, yes please explain: _____

Did you quit after being told that you would be fired? ___ Yes ___ No

Did you leave a job by mutual agreement? ___ Yes ___ No

Are you applying under Indian Preference? ___ Yes ___ No

(Attach Verification Form BIA-4432 and/or copy of Tribal ID)

Are you applying under Veterans Preference? ___ Yes ___ No

(Attach verification DD214 and/or Vet Military ID)

Are you legally entitled to work in the US? ___ Yes ___ No

Are you able to perform the essential functions listed on the job description? ___ Yes ___ No

List any acquired languages, including Dakota and your ability to speak, write, and read:

** Tiospa Zina Tribal School is an Indian Preference and at-will employer**

EDUCATIONAL SUMMARY:

	School	Year Graduated	Degree
HS/GED	_____	_____	_____
University/College	_____	_____	_____
Graduate School	_____	_____	_____

EMPLOYMENT HISTORY:

Start with your **last job first**, including job-related military service assignments and volunteer activities.

1. Employer & Address:

Employer Phone: _____ Dates Employed: _____

Employer Supervisor: _____

Job Title/Responsibilities: _____

Reason for Leaving: _____

2. Employer & Address:

Employer Phone: _____ Dates Employed: _____

Employer Supervisor: _____

Job Title/Responsibilities: _____

Reason for Leaving: _____

3. Employer & Address:

Employer Phone: _____ Dates Employed: _____

Employer Supervisor: _____

Job Title/Responsibilities: _____

Reason for Leaving: _____

REFERENCES:

List references **other** than those listed as a current or former employer (please refrain from listing direct relatives; i.e. parents, siblings, children, etc.):

1. Name: _____ **Phone:** _____

Address: _____ **Relationship:** _____

2. Name: _____ **Phone:** _____

Address: _____ **Relationship:** _____

3. Name: _____ **Phone:** _____

Address: _____ **Relationship:** _____

Disclosure Affidavit

The Indian Child Protection and Family Violence Prevention Act, as amended, 25 U.S.C. 3207, and the Crime Control Act, as amended, 42 U.S.C. 13041, require that persons who are employed in positions having regular contact with or control over Indian children must undergo a character investigation to ensure they have not been found guilty of, or entered a plea of nolo contendere or guilty to, any felonious offense, or any of 2 or more misdemeanor offenses under Federal, State, or Tribal law involving crimes involving a child; violence; crimes against persons; sex offenses including: sexual assault, molestation, sexual exploitation, sexual contact, or prostitution; or a drug felony.

I understand that if incomplete, falsification, or misrepresentation is grounds for disqualification or termination.

If "Yes" to any of the following, check the box that applies:

- I entered a plea of guilty to:
- I entered a plea of nolo contendere to:
- I was found guilty of:

- A crime involving a child
- A crime of violence
- A crime against persons
- A sex crime, including: sexual assault, molestation, sexual exploitation, sexual contact or prostitution
- A drug felony
- Any felony crimes

Are you currently charged with any violation of law? Yes No

If "Yes", please provide the offense, date of the offense, name and address of the court(s), and the disposition of the charge(s):

Date	Offense/Disposition of Charges	Name of Court	Address of Court

Are you delinquent on any Federal debt? Yes No

Authorization to Release Information

I authorize investigations of statements in this application. I understand any misrepresentation or omission of facts called for in this application may be used for cancellation of this application or separation from employment. I further authorize an investigation into my background and give my consent to Tiospa Zina Tribal School and its agents or independent contractor to perform appropriate tests or examinations for alcohol, illegal drugs, and/or other pre-employment tests and random drug tests for the duration of my employment. The results of these test examinations may be released to Tiospa Zina Tribal School's designee for whatever use it deems fair and appropriate under the circumstances.

The school may use the following resources as part of their background check process: Sisseton Wahpeton Law Enforcement; Sisseton Wahpeton Child Protections Agency; South Dakota Child Protection Services; South Dakota Division of Criminal Investigations; Corporate Investigations, Inc.; and Tribal, State, and Federal Sex Offender Registries.

Applicant's Signature

Date

E-mail Address