



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 Tribal School Board. If you neglect to 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 applying for: _____

Last Name	First Name	Middle Initial	Date of Birth
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PO Box	Street	City	State	Zip
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Telephone #: Home and Emergency	Drivers License
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Tribal Affiliation (If Applicable)	Enrollment Number	SWO District
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Are you applying under Indian Preference? ___ Yes ___ No
(Attach Verification Form BIA-4432)

Are you applying under Veterans Preference? ___ Yes ___ No
(Attach verification)

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

Have you been convicted of a felony? ___ Yes ___ No
(If yes, state type of felony and date :)

Type of Felony _____

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

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 insure 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 of violence; crimes against persons; sex offenses, including sexual assault, molestation, exploitation, contact or prostitution; offenses involving a child victim; or a drug felony.

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

I entered a plea of guilty to _____ Yes _____ No

I entered a plea of nolo contendere to _____ Yes _____ No

I was found guilty of _____ Yes _____ No

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

For each conviction, provide the name of the offense, the name and address of the court, and the date of the conviction.

Date	Offense	Name of Court	Address of Court

Certificate of Applicant

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 understand and 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, with the results of these test examinations to be released to Tiospa Zina Tribal School's designee for whatever use it deems fair and appropriate under the circumstances.

As a minimum the school may use the following resources as part of their background checking process: Sisseton Wahpeton Law Enforcement; Sisseton Wahpeton Child Protections Agency; South Dakota Child Protection Services; South Dakota Division of Criminal Investigations and Corporate Investigations, Inc.

We are an Indian Preference and at-will employer.

Applicant Signature

Date

Social Security #

Email Address

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer

reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is

placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>

DISCLOSURE STATEMENT

Disclosure

In connection with an evaluation of your qualifications for employment, promotion, reassignment, or retention as an employee or contractor with Tiospa Zina Tribal School ("the Employer"), the Employer may obtain a "consumer report" and an "investigative consumer report" pertaining to you. A "consumer report" consists of any written, oral, or other communication of information by a consumer reporting agency bearing on a person's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. An "investigative consumer report" is a consumer report or portion thereof in which information on a person's character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, or associates of the person reported on, or through personal interviews with others with whom he/she is acquainted or who may have knowledge concerning such items of information.

The Employer will be utilizing Corporate Investigations, Inc. ("CII") (2275 Swallow Hill Road, Suite 500, Pittsburgh, Pa 15220, 1-800-600-0244, <http://ciilink.com>) a consumer reporting agency, to conduct an investigation into your background and to prepare a consumer report and/or investigative consumer report pertaining to you. In conducting its investigation, CII may contact your neighbors, friends, associates, or other people who may have knowledge of your personal, employment, or educational background. CII may obtain information concerning, among other things, your character, general reputation, personal characteristics, mode of living, diplomas, degrees, licenses, transcripts, credit history, driving record, employment eligibility (E-Verify), employment history, criminal arrests and convictions, motor vehicle violations, records of civil judgments, tax liens, bankruptcy information, drug and/or alcohol test results, and worker's compensation history.

You have the right to obtain additional disclosures concerning the nature and scope of the investigation that the Employer has requested. You also have the right to request a written summary of your rights pursuant to Section 609(c) of the Fair Credit Reporting Act. If you would like to obtain additional disclosures concerning the nature or scope of the investigation that the Employer has requested, or if you would like to obtain a written summary of your rights, please submit a written request to the Employer. CII's Privacy Statement may be viewed at <http://ciilink.com>.

Acknowledgment

I hereby acknowledge that I have received and read this Disclosure Statement.

Sign Name

Print Name

Date



corporate investigations, inc.

STATE SPECIFIC NOTICES

If you live or work in any of the states listed below, please note the following:

CALIFORNIA: Applicants residing in California acknowledge receipt of the Notice Regarding Background Investigation Pursuant to California Law. If requested by the Employer, California applicants also acknowledge that the Employer will obtain a consumer credit report from TransUnion through CII and have been advised regarding the specific basis for which the consumer credit report is required.

Additionally, under Section 1786.22 of the California Civil Code, you may view the file maintained on you by Corporate Investigations, Inc. during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication Services, by appearing at Corporate Investigations, Inc. in person or by mail. You may also receive a summary of the file by telephone. CII is required to have personnel available to explain your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.

MAINE: Upon request you will be informed whether or not a consumer report was requested, and if such a report was requested, the name and address of the consumer reporting agency furnishing the report. You will be provided a copy of your rights under the Maine Fair Credit Reporting Act.

MASSACHUSETTS: If you contact the Employer's Human Resources department, you have the right to know whether the Employer ordered an investigative consumer report about you. You also have the right to ask the CRA for a copy of any such report.

MINNESOTA: You have the right in most circumstances to submit a written request to the CRA for a complete and accurate disclosure of the nature and scope of any consumer report the Employer ordered about you. The CRA must provide you with this disclosure within five (5) business days after its receipt of your request or the report was requested by the Employer, whichever date is later.

NEW YORK: Applicants seeking employment in the state of New York acknowledge receipt of a copy of article 23-A of New York Correction law.

You have the right to inspect and receive a copy of any investigative consumer report requested by the Employer by contacting the CRA identified below.

**Corporate Investigations, Inc.
2275 Swallow Hill Road, Building 500
Pittsburgh, PA 15220
Telephone: 800-600-0244
Facsimile: 800-891-1399
<http://ciilink.com>**

WASHINGTON STATE: If you submit a written request to the Employer's Human Resources department, you have the right to a complete and accurate disclosure of the nature and scope of any investigative consumer report the Employer ordered about you. You are entitled to this disclosure within five business days after the date your request is received or the Employer ordered the report, whichever is later. You also have the right to request a written summary of your rights under the Washington Fair Credit Reporting Act.

California, Massachusetts, Minnesota, New Jersey and Oklahoma Residents only: Please check this box if you would like to receive a copy of a consumer report or investigative consumer report at no charge whenever you have a right to receive such a copy, if one is obtained by the Employer. The report will be provided to you within three (3) business days after the report is provided to the Employer.

I hereby acknowledge that I have received and read the additional state specific notices:

Print Name

Sign Name

Date

AUTHORIZATION AND RELEASE

Tiospa Zina Tribal School ("The Employer") has informed me that the Employer may obtain a "consumer report" or "investigative consumer report" pertaining to me, in connection with the evaluation of my qualifications for employment, promotion, reassignment, or retention as an employee or contractor of the Employer's. The Employer has also informed me of the following: (1) that a "consumer report" consists of any written, oral, or other communication of information by a consumer reporting agency bearing on a person's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living; (2) that an "investigative consumer report" is a consumer report or portion thereof in which information on a person's character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, or associates of the person reported on, or through personal interviews with others with whom he/she is acquainted or who may have knowledge concerning such items of information; (3) that the Employer will be utilizing Corporate Investigations, Inc. ("CII") (2275 Swallow Hill Road, Suite 500, Pittsburgh, Pa 15220, 1-800-600-0244, <http://ciilink.com>), a consumer reporting agency, to assist in conducting an investigative consumer report pertaining to me; (4) that, in conducting their investigation, the Employer and CII may contact my neighbors, friends, associates, and other people who may have knowledge of my personal, employment, or educational background; and (5) that the Employer and CII may obtain information concerning, among other things, my character, general reputation, personal characteristics, mode of living, diplomas, degrees, licenses, transcripts, credit history, driving record, employment eligibility (E-Verify), employment history, criminal arrests and convictions, motor vehicle violations, records of civil judgments, tax liens, bankruptcy information, drug and/or alcohol test results and worker's compensation history.

I hereby authorize the Employer to procure, and CII to prepare, a consumer report and/or investigative consumer report pertaining to me. I further authorize the Employer and CII to conduct an investigation into my personal, employment, and educational background for purposes of the preparation of such reports.

I further authorize the Employer and CII, in conducting their investigation, to contact my neighbors, friends, associates, and other people who may have knowledge of my personal, employment, or educational background, and for the Employer and CII to obtain information concerning, among other things, my character, general reputation, personal characteristics, mode of living, diplomas, degrees, licenses, transcripts, credit history, driving record, employment eligibility (E-Verify), worker's compensation history, employment history, criminal arrests and convictions, motor vehicle violations, records of civil judgments, tax liens, bankruptcy information, and worker's compensation history. I further authorize CII to provide the Employer with the information that CII obtains pursuant to its investigation.

In authorizing this investigation, I will voluntarily provide the supplemental data requested on the attached Supplemental Data Form, to ensure that any records which are located which may refer to a person with a name that is identical or similar to mine are properly determined as referring to, or not referring to, me. I understand that I do not have to provide the supplemental data, and that if I do it will be used only in connection with this investigation. Additionally, I certify that I, the undersigned applicant, have personally completed the Supplemental Data Form and any supporting documents required to conduct my background check.

I hereby release the Employer, CII, and any persons providing information to the Employer or CII from any and all liability that may arise in connection with the above-described background investigation.

If I am hired as an employee or retained as a contractor, this authorization will remain on file and shall serve as an ongoing authorization for the Employer to obtain consumer reports and investigative consumer reports at any time during my employment or contractual relationship with the employer.

I further agree that copies of this Authorization and Release that show my signature are as valid as the original Authorization and Release that I have signed.

Before signing this Authorization and Release, I have had the opportunity to review this document with anyone of my choosing, including an attorney.

Print Name

Social Security Number

Sign Name

Date

EXHIBIT 3

06/2015

SUPPLEMENTAL DATA
(Please Print Clearly)

Name _____
Last Name, First Name, Middle Name (as listed on Social Security Card)

Date of Birth _____

Social Security Number: _____

Maiden Name or Other Names Used _____
(Please list the year when each name changed.)

Mother's Maiden Name (For applicants who are living or have lived in Puerto Rico or Mexico) : _____

Applicant Phone (Home & Cell) Numbers _____ Applicant email address _____

Driver's License Number _____ State _____

HOME ADDRESSES FOR PAST 7 YEARS (Use additional page if needed)

Street Address	City, State	Zipcode	County	From (MM/YR)	To (MM/YR)

EDUCATION (List ultimate degree)

GED: Yes ___ No ___ Date received _____ Name and Address of Site: _____
Name
City _____ State _____

_____ Mo ___ Yr ___ to Mo ___ Yr ___
Name of High School
Street Address, City, State, Zip Code _____ Diploma Received: Yes ___ No ___
Date of Graduation: Mo ___ Yr ___

List last name(s) if different than above at time of high school attendance: _____

_____ Mo ___ Yr ___ to Mo ___ Yr ___
Name of College/University
Street Address, City, State, Zip Code _____ Degree Received: Yes ___ No ___
Degree(s)/Major(s) _____ Date Degree Received _____

List last name(s) if different than above at time of college attendance: _____

Type of Professional License/Certification _____ State _____ Date Received _____
License/Certification # _____
Location where License/Certification was received _____

EMPLOYMENT HISTORY (list most recent first) (include military service)

May we contact Present Employment? Yes ___ No ___

_____ Phone Number _____
Company Name area code and extension
Full address (city, state, zip) _____ First and Last Name of Supervisor
Dates of Employment (include month and year) _____ Supervisors Title
Reason for leaving _____ Position Held by Applicant

Company Name Phone Number _____
area code and extension

Full address (city, state, zip) First and Last Name of Supervisor

Dates of Employment (include month and year) Supervisors Title

Reason for leaving Position Held by Applicant

Company Name Phone Number _____
area code and extension

Full address (city, state, zip) First and Last Name of Supervisor

Dates of Employment (include month and year) Supervisors Title

Reason for leaving Position Held by Applicant

Company Name Phone Number _____
area code and extension

Full address (city, state, zip) First and Last Name of Supervisor

Dates of Employment (include month and year) Supervisors Title

Reason for leaving Position Held by Applicant

Company Name Phone Number _____
area code and extension

Full address (city, state, zip) First and Last Name of Supervisor

Dates of Employment (include month and year) Supervisors Title

Reason for leaving Position Held by Applicant

REFERENCES

_____ () _____ () _____
Name Home phone# Business phone#
_____ Years Known _____ Socially _____ Professionally _____
Address
_____ Title _____
Business address
_____ Reference Email address _____

_____ () _____ () _____
Name Home phone# Business phone#
_____ Years Known _____ Socially _____ Professionally _____
Address
_____ Title _____
Business address
_____ Reference Email address _____

_____ () _____ () _____
Name Home phone# Business phone#
_____ Years Known _____ Socially _____ Professionally _____
Address
_____ Title _____
Business address
_____ Reference Email address _____

_____ () _____ () _____
Name Home phone# Business phone#
_____ Years Known _____ Socially _____ Professionally _____
Address
_____ Title _____
Business address
_____ Reference Email address _____