



**-Please complete all sections of this employment application.**

**-We will not accept partially filled applications.**

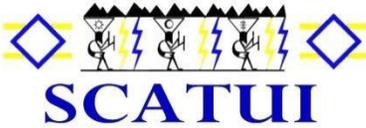
**-All signature designated areas must be signed**

**-The employment record section of the application must be completely filled out; you may not put “See resume”.**

**-You may attach your resume along with the application, if you so desire to do so.**

**Thank You,**

**SCATUI HR Department**



# APPLICATION FOR EMPLOYMENT

San Carlos Apache Telecommunications Utility, Inc.  
 P.O. Box 1000, 10 Telecom Lane  
 Peridot, AZ 85542

Please read and sign before filling out this application.

This employer does not discriminate in hiring or employment on the basis of race, color, religion, national origin, sex, ancestry, age, veteran's status or disability. Qualified disabled individuals will be given reasonable accommodations for employment and advancement unless such an accommodation would impose an undue hardship on the conduct of the employer's business. No question on this application is intended to secure information to be used for such discrimination. This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

In processing this employment application, the corporation or any of its affiliates and subsidiaries may request that an investigative consumer report be prepared; which may include information as to your character, general reputation, criminal record, and personal characteristics as provided by the Fair Credit Reporting Act of 1970 and as amended in 1996. You have the right to request that the company completely and accurately discloses to you the nature and scope of the investigation requested. Such a request must be made in writing to the Human Resources Department of this company within a reasonable time after you complete this application. Should employment be denied as a direct result of information contained in such an investigative consumer report, you will be advised as to the name and address of the consumer reporting agency supplying the report and should contact such agency for any further information you desire.

I authorize and direct San Carlos Apache Telecommunications Utility, Inc., or any of its affiliates and subsidiaries to make whatever inquiries it deems necessary or desirable, and to contact consumer reporting agencies or other persons, and to secure consumer reports or investigate consumer reports in connection with my application for employment. I further authorize and direct any person of consumer reporting agency to participate in and make such inquiries at the request of such corporation of its affiliates and subsidiaries, and to compile and furnish any information it may have or obtain in response to such inquiries.

**Signature:**

**Date:**

Please answer **every** question. Use **ink**. Please **print**.

Social Security No. \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
First Middle Last

Home Number \_\_\_\_\_

Address \_\_\_\_\_ E-mail \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Length of Time at this Address \_\_\_\_\_

List previous addresses if address changed during the past 5 years.

Address	City	State	Zip Code	From (date)	To
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Position applied for \_\_\_\_\_ Salary requirements \_\_\_\_\_

How were you referred to us? \_\_\_\_\_ Date available for work \_\_\_\_\_

The family relationship (through marriage or by blood) of job applicant to directors, officers, and employees of this company must be considered prior to a decision to employ.

Do you presently have relatives working for this company? Yes ( ) No ( ) If yes, explain \_\_\_\_\_

Are you over 17 years of age? Yes ( ) No ( ) Other names you have used \_\_\_\_\_

Are you legally authorized to work in the U.S.? Yes ( ) No ( ) Do you have a valid Driver's License? Yes ( ) No ( )

Name	Address	City	State	Major Course of Subject	Circle last year completed	If graduated, please provide a copy of transcript	GPA/Degree
High School	_____	_____	_____	_____	1 2 3 4	_____	_____
Business School	_____	_____	_____	_____	1 2 3 4	_____	_____
College	_____	_____	_____	_____	1 2 3 4	_____	_____
Graduate Work	_____	_____	_____	_____	1 2 3 4	_____	_____

**Are you claiming Indian preference? Yes ( ) No ( )**

Indian Preference: Preference in hiring and promotion may be given in accordance with the Federal and Tribal Indian Preference Act. If claiming preference, a copy of a "Certificate of Indian Blood" is required (please attach). Subject to our Indian Preference policy, San Carlos Apache Telecommunications Utility, Inc. is an Equal Opportunity Employer (EOE).

## Employment Record

Have you been employed here previously? Yes ( ) No ( )      Have you ever applied here before? Yes ( ) No ( )

Have you ever been convicted of a criminal offense or other illegal activity? Yes ( ) No ( ) if yes, please explain. (A conviction will not necessarily disqualify you from employment.) \_\_\_\_\_

**Starting with present or most recent**, list all previous employers. Include self-employment, summer and part-time jobs. If you worked under a name other than shown on the front of this application, please inform the interviewer as to what name this corporation should use when making previous employment verification inquiries.

Name and Address of Former Employer		Dates Employed		Position and Duties	Salary		Please explain why you left your former position
Company Name	Address Telephone.	From Mo. & Yr.	To Mo. & Yr.		Starting	Leaving	
Immediate Supervisor	City and State Zip						
Company Name	Address Telephone.	From Mo. & Yr.	To Mo. & Yr.		Starting	Leaving	
Immediate Supervisor	City and State Zip						
Company Name	Address Telephone.	From Mo. & Yr.	To Mo. & Yr.		Starting	Leaving	
Immediate Supervisor	City and State Zip						
Company Name	Address Telephone.	From Mo. & Yr.	To Mo. & Yr.		Starting	Leaving	
Immediate Supervisor	City and State Zip						

If presently employed, why do you desire to change your position? \_\_\_\_\_

If you are now employed, may we contact your present employer? Yes ( ) No ( )

## Unemployment Record

From		To		Please explain when and why you were unemployed.
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	
Mo.	Yr.	Mo.	Yr.	

## Military Experience

Branch: \_\_\_\_\_

From: \_\_\_\_\_

To: \_\_\_\_\_

Are you able to perform all essential functions of the job for which you are applying, with or without reasonable accommodations? Yes  No

Are you willing to work overtime? Yes  No

Are you willing to work on weekends? Yes  No

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**References**

**Professional References:** List three professional references from current or previous employment

Name	Title/Occupation	Company/Address	Daytime Phone	Yrs Known

**Personal References:** List three personal references **NOT** including family

Name	Title/Occupation	Company/Address	Daytime Phone	Yrs Known

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**Please read before signing. If you have any questions or concerns regarding any of these statements, please express them to the employment interviewer before signing.**

STATEMENT OF NON-DISCRIMINATION: San Carlos Apache Telecommunications Utility, Inc., is the recipient of federal financing assistance from the Rural Utilities Service, and agency of the United States department of Agriculture, and is subject to the provisions of Title VII of the Civil rights Act of 1964, as amended, Section 504 of the Rehabilitation Act of 1973, as amended, and the rules and regulations of the United States which provides that no person in the United States, on the basis of race, color, religion, national origin, age, or disability shall be excluded from participation in, admission or access to, denied the benefits of, or otherwise subjected to discrimination under any of this organizations programs of activities.

Contingent upon my employment with San Carlos Apache Telecommunications Utility, Inc., I agree to comply with all rules and regulations as set forth in the employer's policy manual, which is not contractual and may be unilaterally changed by the employer at anytime, or other communications distributed to all employees. I also understand that following any offer of employment, that such employment is conditional upon a favorable health evaluation administered uniformly for this job. Such health evaluation may include a physical examination, a drug test and/or completion of a health evaluation form, to which I hereby consent. The results of the tests will remain confidential with limited, but necessary exceptions.

I am aware that the Immigration Reform and Control Act of 1986 provides that the employers must verify, on a form provided by the Attorney General, that anyone hired is not an "unauthorized alien." As a condition of employment, I agree to supply whatever documentation may be required to establish my citizenship or verify that I am authorized by the Secretary of Labor to work in this country.

I understand that in the absence of a written agreement to the contrary, my status, if employed, will be that of an employee at will, with no contractual rights, expressed or implied. In consideration of my employment, I specifically agree that my employment may be terminated with or without cause, with or without notice, at any time, at the option of either the employer or myself.

I further understand that no director, officer or employee of San Carlos Apache Telecommunications Utility, Inc., has any authority to state, suggest or imply that I have an employment contract for other than an indefinite period of time. Promotions, performance evaluations, salary increases, merit raises, and/or the statement of my salary in other than hourly or weekly rates does not define my period or length of employment. In other words, I do not have any continuing expectancy of employment for any period of time, definite or indefinite, should a job offer be extended and accepted.

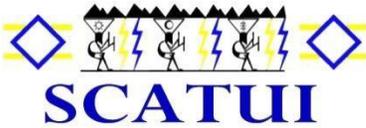
I hereby acknowledge that I have read the above statements and understand the same. I certify that all statements made by me on this application are true and complete. I understand that falsification of any information contained in this application or omission of any information requested in this application will be reason for termination or rejection of this application. My answers to optional disclosures were given voluntarily, and I understand that the corporation will not use those answers to discriminate against me.

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Applicant Signature

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Date



Applicant:

San Carlos Apache Telecommunications Utility, Inc. (SCATUI) employees, as a condition of employment, are required to be free from any measurable amounts of illegal drugs, unprescribed controlled substances and alcohol. Because SCATUI is committed to providing a drug-free working environment for our customers and employees, all offers of employment are contingent upon a urinalysis drug test which indicates that you are free of illegal drugs, alcohol and unprescribed controlled substances.

If you are offered a position with SCATUI, you will be required to report within 24 hours, with photo identification, to take a urinalysis drug test. Although certain security measures are taken in order to prevent cheating, your personal privacy in the collection process will be respected. The results will be forwarded to the appropriate person at SCATUI.

## **CONSENT AND RELEASE FOR TESTING**

I consent freely and voluntarily to the collection and testing of a urinalysis drug test. I hereby release and hold harmless SCATUI, its employees, designated representatives and agents, from any liability whatsoever arising from this request to furnish my specimen, the testing of my specimen and decisions made concerning my application for employment or my continued employment based upon the results of these tests. I further authorize the confidential release of laboratory drug test results to SCATUI or designee of SCATUI at any further date, as they are needed.

If I should test positive for a prescription medication and there is no record of verification of prescriptions, I understand that my test results will be considered positive and that I will not be eligible for a position at San Carlos Apache Telecommunications Utility, Inc.

I have read and understand the San Carlos Apache Telecommunications Utility, Inc. drug policy and I am aware of the consequences of policy violation.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date