



**TOHONO O'ODHAM NATION  
TRIBAL EMPLOYMENT RIGHTS OFFICE**  
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## **ATTENTION TOHONO O'ODHAM NATION TERO CLIENTS**

### **Positions Available**

#### **2-General Laborers \$20.21/HR**

2 years of underground construction, this includes utilities, pipelaying and trenching safety experience, general laborer duties that includes shoveling, general clean up, must have PPE and transportation to the jobsite, estimated 3 month position

**Company:** Central Arizona Civil Construction Company

#### **Project Title/Location:**

TOUA Chui Chu-White Horse Pass Intertie Project, White Horse Pass  
Community, Sif Oidak District

**CLOSING DATE: September 18, 2025 at 3:30PM**

**INTERVIEW DATE: TBD via GoTo (virtual)**

**CENTRAL ARIZONA CIVIL CONSTRUCTION COMPANY**

**PO BOX 1224**

QUEEN CREEK, AZ 85142

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a résumé, but all questions must be answered.

**POSITION APPLYING FOR**

LABORER	<input type="checkbox"/>	LOADER-OPERATOR	<input type="checkbox"/>	N/A AT THIS TIME
PIPE LAYER	<input type="checkbox"/>	<del>WATER TRUCK DRIVER</del>	<input type="checkbox"/>	N/A AT THIS TIME
OPERATOR	<input type="checkbox"/>	<del>FORMAN</del>	<input type="checkbox"/>	N/A AT THIS TIME
<del>PIPE FUSION TECH</del>	<input type="checkbox"/> N/A AT THIS TIME	<del>OTHER</del>	<input type="checkbox"/>	N/A AT THIS TIME

## PERSONAL DATA

NAME, (LAST,FIRST,MIDDLE)

STREET ADDRESS AND/OR MAILING ADDRESS

CITY

STATE

ZIP

CELLULAR NUMBER

HOME NUMBER

ARE YOU AUTHORIZED TO SORK IN THE U.S. ON AN UNRESTRICTED BASIS?

YES

NO

NO

Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.)

**YES**

NO [

IF YES EXPLAIN:

Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job?

**YES**

NO

Can you perform these essential functions of the job with or without reasonable accommodation?

YES

NO

## QUALIFICATIONS

**QUALIFICATIONS** Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training.

	SCHOOL NAME	DEGREE	ADDRESS/CITY/STATE
SCHOOL			
SCHOOL			
OTHER			

**SPECIAL SKILLS** LIST ANY SPECIAL SKILLS OR EXPERIENCE THAT YOU FEEL WOULD HELP YOU IN THE POSITION YOU ARE APPLYING FOR (LEADERSHIP, ORGANIZATIONS/TEAMS ECT).

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## REFERENCES

Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.

NAME	ADDRESS/CITY/STATE	PHONE	RELATIONSHIP

**WORK HISTORY** Start with your present or most recent employment and work back. Use separate sheet if necessary. (INCLUDE PAID AND UNPAID POSITIONS)

JOB TITLE #1	START DATE (MO/DAY/YR)	END DATE (MO/DAY/YR)
COMPANY NAME	SUPERVISOR'S NAME	PHONE NUMBER
CITY	STATE	ZIP
DUTIES:		
REASON FOR LEAVING	STARTING SALARY	ENDING SALARY
JOB TITLE #2	START DATE (MO/DAY/YR)	END DATE (MO/DAY/YR)
COMPANY NAME	SUPERVISOR'S NAME	PHONE NUMBER
CITY	STATE	ZIP
DUTIES:		
REASON FOR LEAVING	STARTING SALARY	ENDING SALARY
JOB TITLE #3	START DATE (MO/DAY/YR)	END DATE (MO/DAY/YR)
COMPANY NAME	SUPERVISOR'S NAME	PHONE NUMBER
CITY	STATE	ZIP
DUTIES:		
REASON FOR LEAVING	STARTING SALARY	ENDING SALARY
JOB TITLE #4	START DATE (MO/DAY/YR)	END DATE (MO/DAY/YR)
COMPANY NAME	SUPERVISOR'S NAME	PHONE NUMBER
CITY	STATE	ZIP
DUTIES:		
REASON FOR LEAVING	STARTING SALARY	ENDING SALARY

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application.

I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

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APPLICANT SIGNATURE

DATE