

TOHONO O'ODHAM NATION TRIBAL EMPLOYMENT RIGHTS OFFICE

P.O. Box 40 Sells, Arizona 85634 Direct Line (520) 383-3304 Tucson Line (520) 547-8160 Fax (520) 383-2781 Email: tero@toua.net



Attention Tohono O'odham TERO Clients Available Positions

3-4 Drywall Installers/Painters \$27.00

Must have at least 1-year drywall <u>and</u> painting experience. Responsible for installing and cutting drywall to fit, including door/window returns and patch/repair work. Mud and tape, with the ability to apply a medium knockdown texture. Prep and paint walls to a uniform finish. Coordinate with Superintendent for daily tasking and quality checks.

Must have own tools for drywall installation, finishing, and texture application, PPE, and must be able to lift up to 50lbs, work from ladders/scaffolds, and follow all safety protocols.

Must be able to pass a federal/county background check

Company: Modular Solutions
Start Date: November 24, 2025
Estimated: 2-3 weeks duration
M-F, 8-10-hour shifts

Project Location – Sells - Planning & Economic Development

CLOSING DATE: Friday, November 14, 2025 at 4pm

INTERVIEW DATE: TBD

Interviews will be held virtually



APPLICATION FOR EMPLOYMENT

Please provide all information requested. Your complete application will be maintained in our active files for six (6) months from the date of application. You may submit a new application at any time.

APPLICANT INFORMATION

Last	Name:	First:	Middle:
Date	of Application:		
Stree	et Address:		
		State:	
Туре	e(s) of Work Desired:		
Hom	e Telephone:		
Work	k telephone:		
Emai	il Address:		
Are y	ou eligible to work in t	e United States of America? (Circle one)	YES NO
How	Were You Referred To	ls? (Circle only one.)	
A)	By an Employee; Nar	e of Employee:	
B)	Advertisement:		
C)	Employment Agency; Name of Agency:		
D)	By Your College; Name of College:		
E)	Open house		
F)	Walk-in		
G)	Other:		

EQUAL OPPORTUNITY EMPLOYER

We are an equal opportunity employer. As such, we do not and will not discriminate on the basis of race, religion, national origin, sex, age, disability, marital status, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.

EMPLOYMENT HISTORY

Starting with the present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume but complete this application as well.

1. Present or Most Recent Company:				
Type of Business:	Type or Class	Type or Classification of Job:		
Street Address:				
City:	State:	Zip Code:	i	
Phone number:				
Brief Description of Job Duties:				
Supervisor's Name:	Phone	number:		
Base salary:	y:		to	
Reason for leaving:				
2. Company:				
Type of Business:		ification of Job:		
Street Address:				
City:	State:	Zip Code:	:	
Phone number:				
Brief Description of Job Duties:				
Supervisor's Name:	Phone	number:		
Base salary:	Dates worke	d: From	to	
Reason for leaving:				

EDUCATIONAL HISTORY

High School - Name:			
Location (city, state):			
Major Course or Subject:			
Dates Attended: From	to	Graduated: Yes □	No □
Degree:			
Technical/Trade (after high scho	<i>pol) -</i> Name:		
Location (city, state):			
Major Course or Subject:			
Dates Attended: From	to	Graduated: Yes □	No □
Degree:			
College (list all attended)			
1) School Name:			
Location (city, state):			
Major Course or Subject:			
Dates Attended: From	to	Graduated: Yes □	No □
Degree:			
2) School Name:			
Location (city, state):			
Major Course or Subject:			
Dates Attended: From	to	Graduated: Yes □	No □
Degree:			
Other education/training			
School Name:			
Location (city, state):			
Major Course or Subject:			
Dates Attended: From	to	Graduated: Yes □	No □
Degree:			

OUTSIDE ACTIVITIES

Please list p	list professional memberships, certificates, or licenses held.			
Please list p	past and present Civic or Cultural Activities (include offices held, if applicable).			
GENERAL				
	Words per Minute:;			
Dictation:	Words per Minute:; □ Unknown			
COMPUTE	R SKILLS			
Hardware:_				
Software: _				
Please list C	Other Skills and/or Equipment/Language Experience You Have Acquired:			
MILITARY				
Branch of S	ervice:			
Dates: Fron	n to			
Present Mili	tary Affiliation: None Reserve (active) Reserve (inactive)			
Kinds of Tra	aining and Duty While in Military Service:			

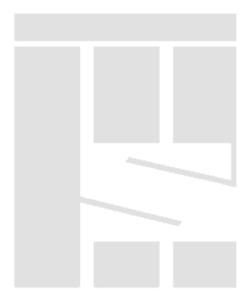
PROFESSIONAL/WORK REFERENCES

List two past supervisors and one person who is not related to you who have knowledge of your qualifications for the position for which you are applying.

Name:			
Title/Relationship:			
Street Address:			
City:	State:	Zip Code:	
Phone number:			
Occupation:			
Name:			
Title/Relationship:			
Street Address:			
City:			
Phone number:			
Occupation:			
Name:			
Title/Relationship:			
Street Address:			
City:	State:	Zip Code:	
Phone number:			
Occupation:			
May We Contact Your Present Employer? Ye	es 🗆 No 🗆		
Wage/Salary Required:	Date Availal	ole to Start:	

I hereby certify that the answers and other information on this application are true and correct and
that I understand any misrepresentation or omission of facts on my part will be justification for
separation from the company's service, if employed. I understand that my employment may be
contingent upon receipt of an alien registration number, verification of birth, and any other pertinent
information bearing upon my employment, and that my continued employment depends upon the will
of the company or myself.

SIGNATURE	DATE
If any of your educational or employment records are	under a name other than the one listed above,
please provide other name/s:	



Thank you for submitting an Application to work for Modular Solutions. We carefully review each application and will contact you if we would like to further discuss your potential employment by our firm.

Thanks for your time!