



**TOHONO O'ODHAM NATION
TRIBAL EMPLOYMENT RIGHTS OFFICE**

P.O. Box 40 Sells, Arizona 85634
Direct Line (520) 383-3304 • Fax (520) 383-2781
West Valley Location: (623) 385-3000 Ext. 72425
Fax: (520) 547-8105 • Email: tero@toua.net



Attention Tohono O'Odham TERO Clients

POSITIONS AVAILABLE

1-PLASTERER \$15.65/ EST. 1 MONTH

Applies coats of plaster to exterior walls, ceilings and partitions of buildings to produce finished surface, according to blueprints, architect's drawings, or oral instructions. **Must have own hand tools and portable power tools:** Directs workers to mix plaster to desired consistency and to erect scaffolds. Spreads plaster over lath or masonry base, using trowel, and smooths plaster with darby and float to attain uniform thickness. Applies scratch, brown, or finish coats of plaster to wood, metal, or board lath successively. Roughens undercoat with scratcher to provide bond for succeeding coats of plaster, creates decorative textures in finish coat by marking surface of coat with brush and trowel or by spattering surface with pebbles. Must have at least 3 years' experience.

1-LABORER \$10.62/ EST 1 MONTH

ASSIST STUCCO GUYS

MUST HAVE OWN TRANSPORTATION AND PROPER WORK ATTIRE.

FOR

OLD PUEBLO STUCCO

**PROJECT LOCATION: TOKA 1011-UP-18 SP & 1012-GR-19 CB
(San Miguel / Santa Rosa)**

**APPLICATIONS AVAILABLE AT THE T.E.R.O. OFFICE, YOUR LOCAL DISTRICT OFFICE, THE
PHOENIX AND TUCSON INDIAN CENTER**

CLOSING DATE IS

Thursday, AUGUST 22, 2019 @ 11:00AM

INTERVIEWS: TBD



P.O. BOX 24056

TUCSON, AZ., 85734

PH: 520-304-7037

FAX: 520-741-2832

www.oldpueblostucco.com

APPLICATION FOR EMPLOYMENT

Completion of this form in no way constitutes an offer of employment. The information requested is required to provide us with information necessary to consider you for any current or future job openings for which you may qualify.

PLEASE PRINT ALL REQUIRED INFORMATION

Last Name		First Name	
Street Address	City	State	Zip Code
Social Security Number _____			
Date of Birth _____			
Contact Phone Number _____			
Cell Phone Number _____			
E-Mail Address _____			
Fax Number _____			

1. Have you ever been convicted of a:

_felony? Yes / No

_misdemeanor involving moral turpitude? Yes / No

If yes to either question, explain below the nature of the offense, date and location. Convictions are evaluated in relation to the applied for position. Explain:

2. Can you provide verification of your eligibility to work in the U.S.? Yes / No

3. Use the space below to list job related licenses, registrations, certificates, with their numbers and expiration dates. Provide additional comments or information that would be of assistance in considering you for this position.

4. Are you willing to travel if the opportunity arises?

EDUCATION AND TRADE TRAINING AND/OR EXPERIENCE

College, Universities, Trade
or Business Schools _____

City, State (List
campus attended) _____

Dates Attended
(Mo/Yr to Mo/Yr) _____

Degree/Diploma/Certifications and
dates received _____

Major Area of Study _____

FORMER EMPLOYERS

(List the last three employers that you have worked for, most recent first. Account for all time employed, unemployed and self employment.

EMPLOYER #1

1. Company Name and Phone Number:
2. Starting Position:
3. Address (No., Street, Suite No.)
4. Compensation Per (hr, week, month, year)
5. Supervisor's Name:
6. City, State, Zip Code:
7. Reason for Leaving:
8. Phone Number:
9. Duties:
10. Hours per week:
11. Dates worked:
12. May we contact this employer Yes / No

EMPLOYER #2

13. Company Name And Phone Number:
14. Starting Position:
15. Company Address (No., Street, Suite No.)
16. Compensation Per (hr, week, month, year)
17. Supervisor's Name and Phone number:
18. City, State, Zip Code:
19. Reason for Leaving:
20. Phone Number:
21. Duties:
22. Hours per week:
23. Dates worked:
24. May we contact this employer Yes / No

EMPLOYER #3

25. Company Name And Phone Number:
26. Starting Position:
27. Address (No., Street, Suite No.)
28. Compensation Per (hr, week, month, year)
29. Supervisor's Name and Phone Number:
30. City, State, Zip Code:
31. Reason for Leaving:
32. Phone Number:
33. Duties:
34. Hours per week:
35. Dates worked:
36. May we contact this employer Yes / No

STATEMENT OF CERTIFICATION

By signing this application, I certify under penalty of law that the information provided anywhere in this application is true, correct, and complete to the best of my knowledge and belief. I also acknowledge that should investigation at any time disclose any misrepresentation or falsification, my resume may be rejected, my name may be removed from further consideration, and I may be disqualified from future examinations and/or terminated from employment. I also authorize the hiring agent to make all necessary and appropriate investigations allowable by law to verify the information provided.

Signature_____

Date _____