



**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 Taper/Finishers \$20.41

Apply tape on walls and ceilings.

Seal joints, repair cracks and any imperfections. Must have tools (mud pan and 6" and 8" knives) and reliable transportation to all jobsites.

Company: [Marin Drywall, LLC](#)

Start Date: ASAP, subject to change

Estimated: 1 month project

Project Location – Kawulk, Little Tucson, San Pedro

CLOSING DATE: Friday, March 8, 2024 at 1PM

INTERVIEW DATE/TIME: TBD

Interviews will be held virtually.



(520)269-5704

Tucson, Arizona

<http://www.marindrywallllc.com>

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

| | | | | |
|-------------------|--------|-------|------------------------|-------------|
| NAME | | DATE | SOCIAL SECURITY NUMBER | |
| PRESENT ADDRESS | LAST | FIRST | MIDDLE | |
| PERMANENT ADDRESS | STREET | CITY | STATE | ZIP CODE |
| PHONE NUMBER | STREET | CITY | STATE | ZIP CODE |
| | | | | REFERRED BY |

EMPLOYMENT DESIRED

| | | |
|--------------------------------------|---------------------|--|
| POSITION | DATE YOU CAN START? | SALARY DESIRED |
| ARE YOU EMPLOYED NOW? | | IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? |
| EVER APPLIED TO THIS COMPANY BEFORE? | WHERE? | WHEN? |

EDUCATION

| | NAME AND LOCATION OF SCHOOL | GRADUATED? | | MAJOR SUBJECTS | AVERAGE GRADES |
|---|-----------------------------|------------|--|----------------|----------------|
| GRAMMAR SCHOOL | | | | | |
| HIGH SCHOOL | | | | | |
| COLLEGE | | | | | |
| TRADE BUSINESS OR CORRESPONDENCE SCHOOL | | | | | |

RELATED SKILLS: (EDUCATION, TRAINING, AND EQUIPMENT KNOWLEDGE)

| |
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| |
|--|

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, BEGINNING WITH PRESENT OR MOST RECENT.)

| DATE MONTH AND YEAR | NAME AND ADDRESS OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|------------------------|------------------------------|--------|----------|--------------------|
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REFERENCES (GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.)

| NAME | ADDRESS | BUSINESS | YEARS AQUAINTED |
|------|---------|----------|--------------------|
| | | | |
| | | | |
| | | | |

IN CASE OF
EMERGENCY NOTIFY

NAME

ADDRESS

PHONE NUMBER

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

DATE

SIGNATURE

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY

DATE

REMARKS:

| | | | | |
|-------------|-----------|----------|-------------|-----------------|
| | | | | |
| | | | | |
| NEATNESS | | | | |
| ABILITY | | | | |
| HIRED | FOR DEPT. | POSITION | WILL REPORT | SALARY WAGES |
| APPROVED 1. | | 2. | 3. | |

Employment manager

Department manager

General Manager