

### 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

### 6- Laborer III/Joint Inserters \$21.00

Skilled tradesmen install expansion control systems, joint sealants and firestopping by following specific blueprints, plans and details. They utilize metal and other materials, install railings, membranes, adhesives, sealants, and ensure measurements and cuts are accurate, may also repair work and install hardware. This job description is subject to changes as the company grows and needs to morph. Must be a team player and help in all areas as needed.

Company: RTI Specialists
Start Date: ASAP
Estimated: 4-6 months project

Project Location – 8200 N. Sarival Ave., Waddell, AZ 85355

CLOSING DATE: Friday July 26, 2024 at 9am
INTERVIEW DATE: Monday July 29, 2024 at 10am
Interviews will be held virtually

### **Personal Information** Name:\_\_\_\_\_\_ SSN: \_\_\_\_\_ Address: City, State, Zip: \_\_\_\_\_\_ Are you eligible to work in the United States? \_\_\_\_ Yes \_\_\_\_ No Have you been convicted of or pleaded 'no contest' to a felony within the last 5 years? \_\_\_\_ Yes \_\_\_\_ No If yes, please explain: \_\_\_\_\_ **Position** Position Applied for: \_\_\_\_\_\_ Date Available: \_\_\_\_\_ Referred by: **Education** Name & Address of School – Degree/Diploma – Graduation Date: Please list any other licenses, certificates, or training you have:

### References

Provide information for three individuals whom we may contact for professional or personal references:

1. Name:	Relationship:	
Address:		
Phone #: ()		
2. W	D.1	
	Relationship:	
Phone #: ()		
3. Name:	Relationship:	
Phone #: ()		
Employment History		
Present or Last Position		
Employer:	Address:	
Supervisor:	Phone #:	
May we contact this employer?	Yes No	
Position Title:	Hourly/Salary Rate:	
Start/End Date:	Reason for Leaving:	
Responsibilities (Include materials	s/equipment used):	

Previous Position		
Employer:	Address:	
Supervisor:	Phone #:	<del></del>
May we contact this employer?	Yes No	
Position Title:	Hourly/Salary Rate:	
Start/End Date:	Reason for Leaving:	
Responsibilities (Include materials	/equipment used):	
Previous Position		
Employer:	Address:	
Supervisor:	Phone #:	
May we contact this employer?	Yes No	
Position Title:	Hourly/Salary Rate:	
Start/End Date:	Reason for Leaving:	
Responsibilities (Include materials	/equipment used):	

I certify that information contained in this application is true and complete. I
understand that false information may be grounds for not hiring me or for
immediate termination of employment at any point if I am hired. I authorize the
verification of any or all information listed above.

Signature:	Date:	
Signature.	Dale.	