

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



Job Announcement

## **Position Available**

(1) General Laborer

\$19.37/ HR

**Company:** Quality Ornamental Iron, LLC.

Start Date: TBA

Project Name: DDT Hotel Pool Area Wrought Iron Fence Fencing

Duration of Job: TBA

Job Site Location: DDT Hotel, Tucson, AZ

Closing Date: Thursday 15, 2024 at 2pm.

Interview date and time: Friday August 16, 2024 at 10am

Interview will be conducted virtually.

Red Sky Consultants LLC. 7120 S. Westover Ave Tucson, Az 85746 ROC #336199

## **Employment Application**

Applicant information	on		
Full name:		Date:	
Address:		Phone:	
Email:	Red 3		
Date Available:	Desired Salary: S	<u>\$</u>	
Position applied for:	nsul	tants	
Are you a citizen of the United States?			
If no, are you authorized to work In the U.S.?	Yes No		
Have you ever worked for this company?	Yes No	If yes, when?	_
Have you ever been convicted of a felony?	Yes No	If yes, explain:	
Native/ Native _ Non-native	Non-Native	Tribal Affiliation:	

## Education

High school:	
Did you graduate? Yes No	
College:	
Did you graduate? Yes No	
References Please list 3-4 professional references.	CL-17
Full Name:	Phone:
Company:	Email:
Full Name:	Phone:
Company:Since	Email:
Full Name:	Phone:
Company:	Email:
Full Name:	Phone:
Company:	Email:

Previous Employment

Company:		Supervisor:	
Job title:	From:	То:	
Responsibilites:			
May we contact your previous supervisor for a reference?	Yes No		
Company:		Supervisor:	
Job title:	From:	То:	
Responsibilites:			_
	YesNo	tants	
previous supervisor for a reference?			
Company:		Supervisor:	
Job title:	From:	To:	
Responsibilites:	_		
May we contact your previous supervisor for a reference?	Yes No		

## Military Service

Signature:\_\_\_\_\_

Branch:	From:	То:	
Rank at discharge:	Type of	discharge:	
If other than honorable, explain:			
Emergency Contact			
Primary Contact			
Full Name:	a s	Phone:	_
Relationship to you:	Ema	ail:	
Secondary Contact			
Full Name:	ince 20	Phone:	-0.0
Relationship to you:	Ema	ail:	_
Disclaimer and signature			
I certify that my answers are true	and complete	to the best of my knowledge	2.
If this application leads to employ information in my application or i	•		g
I certify that my answers are true	yment, I unders	stand that false or misleading	

Date:\_\_\_