



**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

2- Journeyman Plumbers \$37.50

Minimum 5 years' hands-on experience in plumbing, including maintenance, repair, and installation, and possesses the ability to operate a forklift safely and efficiently. Plumbing rough-ins and finishing, laying foundation for water supply and drainage systems by installing pipes within walls, floors, and ceilings.

Configures waste and vent pipes for optimal flow and aligns stub-outs for seamless fixture installations. Expertly installs and connects sinks, faucets, toilets, showers, tubs, dishwashers, washing machines and water heaters. Conducts system testing to ensure leak-free connections, proper water flow, and professional finish.

Must have necessary tools for the job.

Must be able to pass a federal/county background check

Company: Modular Solutions

Start Date: ASAP

Estimated: 2–3-day project

Project Location – Sells District Office

CLOSING DATE: Tuesday, January 14, 2025 at 1pm

INTERVIEW DATE: January 15, 2025 beginning at 10am

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: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Type(s) of Work Desired: _____

Home Telephone: _____

Work telephone: _____

Email Address: _____

Are you eligible to work in the United States of America? (Circle one) YES NO

How Were You Referred To Us? (Circle only one.)

A) By an Employee; Name 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 Classification of Job: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone number: _____

Brief Description of Job Duties: _____

Supervisor's Name: _____ Phone number: _____

Base salary: _____ Dates worked: From _____ to _____

Reason for leaving: _____

2. Company: _____

Type of Business: _____ Type or Classification of Job: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone number: _____

Brief Description of Job Duties: _____

Supervisor's Name: _____ Phone number: _____

Base salary: _____ Dates worked: 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 school) - 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 professional memberships, certificates, or licenses held.

Please list past and present Civic or Cultural Activities (include offices held, if applicable).

GENERAL SKILLS

Typing: Words per Minute: _____; ☐ Unknown

Dictation: Words per Minute: _____; ☐ Unknown

COMPUTER SKILLS

Hardware: _____

Software: _____

Please list Other Skills and/or Equipment/Language Experience You Have Acquired: _____

MILITARY RECORD

Branch of Service: _____

Dates: From _____ to _____

Present Military Affiliation: None _____ Reserve (active) _____ Reserve (inactive) _____

Kinds of Training 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: _____ State: _____ Zip Code: _____

Phone number: _____

Occupation: _____

Name: _____

Title/Relationship: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone number: _____

Occupation: _____

May We Contact Your Present Employer? Yes ☐ No ☐

Wage/Salary Required: _____ Date Available 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!*