

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

1- Plumber/Laborer \$25.00

Responsible for repairs, maintenance, and other associated works, locating and marking positions for plumbing works such as pipe connection, fixtures in walls and floors, and passage holes, testing and identifying pipe leaks with air and water pressure gauges, measuring, bending, threading, and cutting pipes using hands, power tools and machines, if necessary. Must be able to read blueprints and drawings to determine the layout of the water supply network, waste and drainage system and plumbing system. Transporting tools, equipment and materials to the jobsite as needed. Abiding by all safety regulations. Must be willing to clean up jobsite after job completion and other labor tasks as assigned.

Must have own manual plumber's tools such as tape measure, channel locks, Pete square, pex cutters. Torches, cordless tools and drills optional.

Company: Joel's Plumbing, LLC. Start Date: ASAP Estimated: 12 month project

Project Location – Topawa & Pisinemo Subdivisions

CLOSING DATE: Friday, March 21, 2025 at 1pm

INTERVIEW DATE: Monday March 24, 2025 beginning at 3pm Interviews will be held virtually

JOEL'S PLUMBING

EMPLOYMENT / JOB APPLICATION

PERSONAL INFORMATION				
FULL NAME:	Middle Last	DATE:		
ADDRESS: Street Address		Apt/Suite		
Street Address		Aproute		
City	State	Zip Code		
E-MAIL:	PH	ONE:		
SOCIAL SECURITY NUMBE	ER (SSN):			
DATE AVAILABLE:	DESIRED PA			
POSITION APPLIED FOR: _				
EMPLOYMENT DESIRED:		ONAL		
HAVE YOU EVER WORKED	EMPLOYMENT ELIGIBIL] YES □ NO* ES* □ NO		
HAVE YOU EVER WORKED *IF YES, WRITE THE STAR HAVE YOU EVER BEEN CO	BLE TO WORK IN THE U.S?] YES [] NO* ES* [] NO YES* [] NO		
HAVE YOU EVER WORKED *IF YES, WRITE THE STAR HAVE YOU EVER BEEN CO *IF YES, PLEASE EXPLAIN	BLE TO WORK IN THE U.S? O FOR THIS EMPLOYER? T AND END DATES: ONVICTED OF A FELONY? EDUCATION] YES [] NO* ES* [] NO YES* [] NO		
HAVE YOU EVER WORKED *IF YES, WRITE THE STAR HAVE YOU EVER BEEN CO *IF YES, PLEASE EXPLAIN	BLE TO WORK IN THE U.S? O FOR THIS EMPLOYER? T AND END DATES: ONVICTED OF A FELONY? EDUCATION] YES [] NO* ES* [] NO YES* [] NO		
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FROM:	TO:	
DEGREE/CERTIFICATION:		
OTHER:	CITY / STATE:	
FROM:	TO:	
DEGREE/CERTIFICATION:		

PREVIOUS EMPLOYMENT

EMPLOYER 1:	ndividual		
E-MAIL:	PHONE:		
Street Address		Apt/Suite	
City	State	Zip Code	
STARTING PAY: \$	HOUR SALARY ENDING PAY: \$_		
JOB TITLE:	RESPONSIBILITIES:		
FROM:	TO:		
REASON FOR LEAVING	:		
EMPLOYER 2:			
EMPLOYER 2: Company / Ir			
EMPLOYER 2: Company / Ir	ndividual PHONE:		
EMPLOYER 2: Company / Ir	ndividual		
EMPLOYER 2: Company / Ir	ndividual PHONE:		
EMPLOYER 2: Company / Ir E-MAIL: ADDRESS: Street Address City	ndividual PHONE:	Apt/Suite Zip Code	
EMPLOYER 2: Company / Ir E-MAIL: ADDRESS: Street Address City STARTING PAY: \$	ndividual PHONE: State	Apt/Suite Zip Code	
EMPLOYER 2: Company / Ir E-MAIL: ADDRESS: Street Address City STARTING PAY: \$ JOB TITLE:	Ndividual PHONE: State DHOUR DING PAY: \$	Apt/Suite Zip Code	
EMPLOYER 2: Company / Ir E-MAIL: ADDRESS: Street Address City STARTING PAY: \$ JOB TITLE: FROM:	ndividual PHONE: State D HOUR D SALARY ENDING PAY: \$ RESPONSIBILITIES:	Apt/Suite Zip Code	_ 🗆 HOUR 🗆 SALARY

ADDRESS: Street Address		Apt/Suite	
City	State	Zip Code	
STARTING PAY: \$	HOUR I SALARY ENDING PA	Y: \$	
JOB TITLE:	RESPONSIBILITIES:		
FROM:	TO:		
REASON FOR LEAVING	G:		
	REFERENCES (PROFESSIONAL ONLY)		
FULL NAME:	Last REL	ATIONSHIP:	
COMPANY:	TITL	E:	
E-MAIL:	PHON	VE:	
FULL NAME:	Last REL	ATIONSHIP:	
COMPANY:		E:	
E-MAIL:	PHON	IE:	
FULL NAME:	Last	RELATIONSHIP:	
COMPANY:	TITL	E:	
E-MAIL:	PHON	IE:	
	MILITARY SERVICE		
ARE YOU A VETERAN	? 🗆 YES 🗆 NO		
BRANCH:	RANK AT DISCHARG	RANK AT DISCHARGE:	

TYPE OF DISCHARGE:

IF NOT HONORABLE, PLEASE EXPLAIN:

BACKGROUND CHECK CONSENT

IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK? I YES INO

DISCLAIMER

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

Please complete each section EVEN IF you decide to attach a resume.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE DATE

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PRINT NAME