



# WORKER APPLICATION

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

*This information will be secured*

Name \_\_\_\_\_

Phone #1 \_\_\_\_\_

Phone # 2 \_\_\_\_\_

Address (include city & zip code)

\_\_\_\_\_

EMAIL Address \_\_\_\_\_

Birth Date \_\_\_\_\_ Driver's License # \_\_\_\_\_ Exp. Date \_\_\_\_\_

## Must Provide Proof: Tribal ID Copies

### TRIBAL PREFERENCE (Membership of a federally recognized Tribe)

Tulalip Member \_\_\_\_\_  
Spouse/Parent/Child of/Guardian of Tulalip: (please indicate which) \_\_\_\_\_  
Other Native - Tribe: \_\_\_\_\_  
Other Native Spouse - Tribe: \_\_\_\_\_  
Descendent of Tulalip – Lineage: \_\_\_\_\_

Enrollment # \_\_\_\_\_  
Enrollment # \_\_\_\_\_  
Enrollment # \_\_\_\_\_  
Enrollment # \_\_\_\_\_

### CERTIFICATIONS/LICENSE/OTHER

Do you have a current Flagger's Card?	No _____	Yes _____	Expiration _____
Do you have a current First Aid/CPR Card?	No _____	Yes _____	Expiration _____
Do you have a CDL License?	No _____	Yes _____	Expiration _____
Do you have DEPENDABLE transportation?	No _____	Yes _____	
Are you willing to commute?	No _____	Yes _____	Distance _____
Did you complete the TERO Construction Training?	No _____	Yes _____	Year _____

Other Certificates \_\_\_\_\_

### UNION MEMBERSHIP

No \_\_\_\_\_ Yes Union \_\_\_\_\_ Local \_\_\_\_\_ Years \_\_\_\_\_

**PLEASE FILL IN THE TOTAL YEARS OR MONTHS OF EXPERIENCE**

**BUILDING TRADES**

CARPENTER            \_\_\_ YRS \_\_\_ MOS  
 FRAMER                \_\_\_ YRS \_\_\_ MOS  
 FINISHER              \_\_\_ YRS \_\_\_ MOS  
 SIDER                  \_\_\_ YRS \_\_\_ MOS  
 ROOFER                \_\_\_ YRS \_\_\_ MOS  
 GLAZIER                \_\_\_ YRS \_\_\_ MOS  
 PLUMBER              \_\_\_ YRS \_\_\_ MOS  
 ELECTRICIAN         \_\_\_ YRS \_\_\_ MOS  
 TILER                  \_\_\_ YRS \_\_\_ MOS  
 HARD WOOD            \_\_\_ YRS \_\_\_ MOS  
 CARPET LAYER        \_\_\_ YRS \_\_\_ MOS  
 PAINTER               \_\_\_ YRS \_\_\_ MOS  
 LABOR                 \_\_\_ YRS \_\_\_ MOS  
 FLOORING             \_\_\_ YRS \_\_\_ MOS  
 IRON WORKER        \_\_\_ YRS \_\_\_ MOS  
 REBAR                 \_\_\_ YRS \_\_\_ MOS

WELDER                \_\_\_ YRS \_\_\_ MOS  
 CONCRETE            \_\_\_ YRS \_\_\_ MOS  
 PAVEMENT/ASPHALT \_\_\_ YRS \_\_\_ MOS  
 FOUNDATION         \_\_\_ YRS \_\_\_ MOS  
 FINISHER              \_\_\_ YRS \_\_\_ MOS  
 PERVIOUS             \_\_\_ YRS \_\_\_ MOS  
 CURB                  \_\_\_ YRS \_\_\_ MOS  
 STRIPING             \_\_\_ YRS \_\_\_ MOS  
 TAPER                 \_\_\_ YRS \_\_\_ MOS  
 DRYWALL/HANGER    \_\_\_ YRS \_\_\_ MOS  
 METAL STUD DRYWALL \_\_\_ YRS \_\_\_ MOS  
 LANDSCAPING        \_\_\_ YRS \_\_\_ MOS  
 IRRIGATION          \_\_\_ YRS \_\_\_ MOS  
 HATCHERY             \_\_\_ YRS \_\_\_ MOS  
 DEMOLITION         \_\_\_ YRS \_\_\_ MOS  
 TAGGING/SPAWNING \_\_\_ YRS \_\_\_ MOS

OTHER \_\_\_\_\_ \_\_\_ YRS \_\_\_ MOS

**EQUIPMENT OPERATORS**

FORKLIFT              \_\_\_ YRS \_\_\_ MOS  
 DOZER                 \_\_\_ YRS \_\_\_ MOS  
 LOADER                \_\_\_ YRS \_\_\_ MOS  
 ROLLER                \_\_\_ YRS \_\_\_ MOS  
 TRACKHOE            \_\_\_ YRS \_\_\_ MOS

**EVENTS**

STAFF                 \_\_\_ YRS \_\_\_ MOS  
 COOKS                \_\_\_ YRS \_\_\_ MOS  
 LEAD                 \_\_\_ YRS \_\_\_ MOS  
 FIRE TENDER         \_\_\_ YRS \_\_\_ MOS  
 ASSISTANT             \_\_\_ YRS \_\_\_ MOS  
 FISH COOK            \_\_\_ YRS \_\_\_ MOS  
 FISH COOK ASST     \_\_\_ YRS \_\_\_ MOS

**REFERENCES (Provide three (3) WORK References)**

NAME \_\_\_\_\_ Contact Number \_\_\_\_\_

NAME \_\_\_\_\_ Contact Number \_\_\_\_\_

NAME \_\_\_\_\_ Contact Number \_\_\_\_\_



ALL PERSONS MAY BE INTERVIEWED BY EMPLOYER BEFORE JOB PLACEMENT; PLEASE ENSURE ALL SKILLS ARE ACCURATE TO AVOID POTENTIAL JOB LOSS. PLEASE PROVIDE ALL CERTIFICATIONS FOR OUR RECORDS

BY SIGNING I AUTHORIZE THE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION.

I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS IS CAUSE FOR INELIGIBILITY OF PLACEMENT.

**SIGNATURE OF APPLICANT**

**DATE**

