

**LUMBEE TRIBE OF NORTH CAROLINA**  
**Post Office Box 2709**  
**Pembroke, North Carolina 28372**  
**An Equal Opportunity Employer**  
**Application for Employment**  
**(Please attach a current resume)**

Full Name of Applicant \_\_\_\_\_

Position Desired \_\_\_\_\_ Date of Application \_\_\_\_\_

Date Available for Employment \_\_\_\_\_ Salary Desired \_\_\_\_\_

Social Security # \_\_\_\_\_ Are you a citizen of the United States? \_ Yes \_ No

Physical Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Daytime Telephone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Are you related to a Tribal Council member or a staff member of the Lumbee Tribe? \_ Yes \_ No

If yes, please identify: \_\_\_\_\_

Are you a member of the Lumbee Tribe of North Carolina? \_ Yes \_ No

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

Educational qualification: High School, Colleges or Universities

College or Universities attended	Dates Attended	Majors/Minors	Date Graduated	Degrees Earned

How did you become aware of this employment opportunity?

Website \_\_\_\_\_ Newspaper (Identify which newspaper) \_\_\_\_\_ Other \_\_\_\_\_

**Employment Record: List the positions you have held starting with your present or most recent employment. If more than one position or classification has been held with a given organization, list each position or classification as a separate period of employment.**

EMPLOYMENT RECORD

(If more space is needed than is provided, a copy of this page may be made.)

Present or last employer \_\_\_\_\_ Telephone # \_\_\_\_\_  
Address \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_ Title of Supervisor \_\_\_\_\_  
Your Title \_\_\_\_\_ Department \_\_\_\_\_  
Starting Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Last or Present Salary \$ \_\_\_\_\_ per \_\_\_\_\_  
Date Employed \_\_\_\_\_ Date Separated \_\_\_\_\_ Total Months Employed \_\_\_\_\_  
Specific Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

Employer \_\_\_\_\_ Telephone # \_\_\_\_\_  
Address \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_ Title of Supervisor \_\_\_\_\_  
Your Title \_\_\_\_\_ Department \_\_\_\_\_  
Starting Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Last or Present Salary \$ \_\_\_\_\_ per \_\_\_\_\_  
Date Employed \_\_\_\_\_ Date Separated \_\_\_\_\_ Total Months Employed \_\_\_\_\_  
Specific Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

Employer \_\_\_\_\_ Telephone # \_\_\_\_\_  
Address \_\_\_\_\_  
Immediate Supervisor \_\_\_\_\_ Title of Supervisor \_\_\_\_\_  
Your Title \_\_\_\_\_ Department \_\_\_\_\_  
Starting Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Last or Present Salary \$ \_\_\_\_\_ per \_\_\_\_\_  
Date Employed \_\_\_\_\_ Date Separated \_\_\_\_\_ Total Months Employed \_\_\_\_\_  
Specific Duties \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

Special Honors and Activities (Please list any special honors awarded you as a professional; also, list church, civic, or service organizations in which you have participated. Attach additional sheets as necessary.)

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List any other significant accomplishments by you. (Attach additional sheets as necessary.)

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References (List below at least four prominent citizens in the community in which you live and work whom you know well and can give information regarding your character and reputation. Please give their name, occupation or profession, address and telephone number.)

1.	_____	3.	_____
	Name		Name
	_____		_____
	Occupation or Profession		Occupation or Profession
	_____		_____
	Address		Address
	_____		_____
	Telephone		Telephone
2.	_____	4.	_____
	Name		Name
	_____		_____
	Occupation or Profession		Occupation or Profession
	_____		_____
	Address		Address
	_____		_____
	Telephone		Telephone

**I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired. I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information. In consideration for my employment, I agree to abide by the rules and regulations of the Lumbee Tribe of North Carolina, which rules may be changed, withdrawn, added or interpreted at any time, at the organization's sole option and without prior notice to me. I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the Lumbee Tribe of North Carolina or myself.**

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**Signature of Applicant**

**This institution, in compliance with Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 503 of the Rehabilitation Act of 1973, Section 402 of the Readjustment Assistance Act of 1974, the Americans with Disabilities Act of 1990, and other Federal laws and regulations, does not discriminate on the basis of race, color, national origin, sex, age, religion, physical or mental disabilities, or status as a veteran in any of its policies, practices or procedures. Preference in employment, contract and subcontract agreements will be given to American Indians and enrolled members of the Lumbee Tribe of North Carolina.**