



Physical Address:
3950 Highway 47 SW, Suite C127A Albuquerque, NM 87105
Fax: 505-869-9755 Phone: 505-869-7568
To submit application/resume electronically – send to
HR@ISLETABC.COM or natalie.salvador@isletabc.com

Application for Employment

The Pueblo of Isleta (POI), Isleta Pueblo Housing Authority (IPHA), and Isleta Business Corporation (IBC), is an equal opportunity employer with Tribal Preference policies. All applicants are considered on the basis of their ability to perform the job without regard to individual race, religion, color, sex, age, national origin, disability, marital or veteran status, or any other protected status.

Please answer each section and question fully and accurately

Date: _____ Position Applied for: _____

Personal Information

Please print clearly

Last Name First Name Middle Initial

Other names used by you for educational and/or employment purposes: _____

Physical Address: _____
Street Number City State Zip Code

Mailing Address: _____
(If different) Street Number City State Zip Code

Telephone Number(s): _____ ; _____ Email Address: _____

Are you currently employed? Yes No

Have you been employed with the Pueblo of Isleta, IPHA, or IBC before? Yes No

If yes, give dates of employment: From: _____ To: _____

Position held: _____

Do you currently have any relatives who are working with/for or who are professionally affiliated, to include Board Members, with Pueblo of Isleta (POI), Isleta Pueblo Housing Authority (IPHA), or Isleta Business Corporation (IBC)? Yes No

** For the clarification purposes IBC defines a family member as any individual who is related, to you, by blood, adoption, marriage, and/or one who resides in the same household, as you.*

If yes, please provide name and relationship

Are you an enrolled member of the Pueblo of Isleta? Yes No

Are you an enrolled member of a Native American Tribe, other than Pueblo of Isleta? Yes No

If yes, which tribe: _____

If you are under 18 years of age only, can you provide required proof of eligibility to work? Yes No

If you are 18 years of age or older, this questions does not apply and you are not required to provide a response. Proof must be provided within 2 business, from the date of hire.

Can you provide written proof that you can legally work in this country? Yes No

All applicants will be required to furnish proof of identity and legal work authority within 2 business days of hire.

Are you currently on "lay-off" status and subject to recall? Yes No

Date available for work _____ / _____ / _____

Classification you available to work: Full-Time Part-Time Temporary On-Call

Driving History

Complete if Applying for a Driving Position Only

Do you possess a valid Driver's License? Yes No

Driver's License Number _____ Class of License _____ State Issued In _____

Are you insurable at standard rates to operate an automobile in this state? Yes No

If No, explain below:

Have you been convicted of driving while impaired or under the influence of alcohol and/or drugs or have you refused to submit to a Blood Alcohol Content (BAC) test within the past three years? Yes No

If Yes, give explanation(s) and date(s): _____

Have you had your operator's license suspended, revoked or administratively restricted within the past three years? Yes No

If Yes, give explanations(s) and date(s): _____

Background History

Have you been convicted of any law violation in the past 10 years? Yes No

Include any plea of "guilty" or "no contest". (Exclude minor traffic violations). Yes No

Are you currently serving probation or deferred adjudication for any crime? Yes No

If you answered "yes", to any of the above, please explain. Please list along with location where the incident(s) occurred, date and disposition.

PLEASE NOTE: A yes in any of the answers above may not necessarily disqualify an applicant from employment.

Educational Background

High level of Education Level

Education Level	Name & Address of School	Course of Study	Credits Completed	Diploma / Degree
High School				
Undergraduate School				
Graduate Professional				
Business or Trade (Specify)				
Professional License (must provide license number)				

Specialized Skills

(Check Skills/Equipment Operated)

Computer Literate: Yes ___ No ___

Which programs can you operate: Word ___ Excel ___ Power Point ___ Access ___ Data Entry ___

List Other Programs: _____

Please indicate if can you identify and operation:

Typewriter ___ WPM ___ Fax ___ Copier ___ Adding Machine ___ Other ___

Employment History

List employment history for the past 5 years, starting with your present or last employer first and working backwards.

Include any job-related military service assignments and volunteer activities, part or seasonal work, and explain any periods of unemployment that exceed 30 days or more.

Attach additional sheets if necessary.

Company Name: _____ Telephone No.: () _____
Address: _____ City: _____ State: _____ Zip Code: _____
Last Position Held: _____ From: Month/Year _____ To: Month/Year _____
Job Duties: _____
Supervisor Name: _____
Reason for Leaving: _____ Starting Wage: _____ Final Wage: _____
If you are currently employed, may we contact your current employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
Company Name: _____ Telephone No.: () _____
Address: _____ City: _____ State: _____ Zip Code: _____
Last Position Held: _____ From: Month/Year _____ To: Month/Year _____
Job Duties: _____
Supervisor Name: _____
Reason for Leaving: _____ Starting Wage: _____ Final Wage: _____
Company Name: _____ Telephone No.: () _____
Address: _____ City: _____ State: _____ Zip Code: _____
Last Position Held: _____ From: Month/Year _____ To: Month/Year _____
Job Duties: _____
Supervisor Name: _____
Reason for Leaving: _____ Starting Wage: _____ Final Wage: _____
Company Name: _____ Telephone No.: () _____
Address: _____ City: _____ State: _____ Zip Code: _____
Last Position Held: _____ From: Month/Year _____ To: Month/Year _____
Job Duties: _____
Supervisor Name: _____
Reason for Leaving: _____ Starting Wage: _____ Final Wage: _____

PROFESSIONAL REFERENCES

List the names and phone numbers of three (3) persons who have knowledge of your job experience.

Name	Years Known /Capacity	Phone No.

PERSONAL REFERENCES

List the names and phone numbers of three (3) persons who have knowledge of your non-work related experience.

Name	Years Known /Capacity	Phone No.

Please Read the Following Statements Carefully:

Your signature acknowledges your acceptance of the following:

1. I attest that all information represented on this application is true and correct, to the best of my knowledge. I understand that any falsification, omission or misrepresentation of information whether in writing or during the interview process is grounds for withdrawal of the offer of employment with Isleta Business Corporation (IBC) and may result in my dismissal if discovered at a later date. I understand that a false or fraudulent answer to any questions or item on any part of this application or its attachments may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment.
2. I authorize IBC to conduct a routine inquiry into my job history and inquire about applicable information concerning my character, general reputation or any other information that IBC deems necessary for my employment.
3. I acknowledge that Federal law prohibits companies from hiring any persons unless valid documents establishing my identity and eligibility to work in the United States is provided. I understand that providing these documents are a condition of employment.
4. I agree to submit to a drug/alcohol test conducted at a licensed facility with the test paid for by IBC. I authorize such results to be released to IBC. I understand that passing the test is a condition of employment.
5. I understand that prior to formal offer of employment, I will be required to undergo a background checks will include criminal records from county, state, federal and tribal courts for the last seven years to include Felony and Misdemeanor convictions, Social Security Number Verification, Motor Vehicle Report History, and may include Credit History depending on the position.
6. I understand that the application for employment does not imply a contract for employment between IBC, or parent company Pueblo of Isleta, and myself. I hereby understand and acknowledge that, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and IBC may discharge Employee at any time. It is further understood that this "at will" employment relationship may not be changed by any written document or by statements that alter the "at will" nature of employment.
7. In the event of employment, I understand that I am required to abide by all IBC policies, rules, regulations, and procedures, including but is not limited to: Harassment Policy, Confidentiality Agreement, Standards of Conduct, Substance Abuse and Drug Testing Policy, and Dress & Grooming policy.

Signature of Applicant

Date

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