



Navajo Nation Oil & Gas Company

Application for Employment

PERSONAL INFORMATION

NAME _____ DATE: _____
 LAST FIRST MI SSN: _____ CENSUS NO. _____

MAILING _____ Birthdate: _____ FEMALE
 ADDRESS _____ Home Phone: () _____
 PHYSICAL _____ MALE
 ADDRESS _____ Message Phone: () _____

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE UNITED STATES? ___YES or ___NO?
 (If offered employment, you will be required to provide documentation to verify eligibility.)

ARE YOU OVER 18 YEARS OLD? YES or NO

EMPLOYMENT DESIRED

POSITION APPLYING FOR: _____ FULLTIME PART-TIME TEMPORARY

SALARY DESIRED: _____ ARE YOU CURRENTLY EMPLOYED? _____ DATE AVAILABLE: _____ NO. OF HOURS AVAILABLE PER WEEK? _____

HOW WERE YOU REFERRED TO NNOGC? _____ Have you ever been employed in any facility of NNOGC? ___ Yes or ___ No If yes, list position and location: _____
 Ad Job Service Employee Other

DO YOU HAVE ANY FAMILY/RELATIVES PRESENTLY (OR HAVE FORMERLY) BEEN EMPLOYED BY NNOGC? YES or NO

Name: _____ Location: _____

WORK AVAILABILITY

DAYS YOU ARE AVAILABLE TO WORK SUN MON TUE WED THU FRI SAT

DO YOU HAVE ANY OBJECTIONS TO WORKING OVERTIME? _____

WILL YOU WORK OVERTIME WITHOUT PRIOR NOTICE? _____

WILL YOU TRAVEL IF REQUIRED OF THIS POSITION? _____

EDUCATION

Please indicate education or training which you believe qualify you for the position you are seeking.

High School: Number of years completed (circle one) 1 2 3 4 Diploma: ___Yes ___No G.E.D.: ___Yes ___No

EDUCATIONAL INSTITUTE/ADDRESS	YEARS ATTENDED	TOTAL CREDIT HOURS	DEGREE EARNED	SUBJECTS STUDIED

OTHER TRAINING RECEIVED _____ TYPING: _____ W.P.M
 _____ 10-KEY _____ K.P.M
 _____ SHORTHAND _____ W.P.M

PROFESSIONAL LICENSES or MEMBERSHIPS: (list all) _____ ACTIVE? _____ Date Received _____ RE-CERTIFICATION DATE: _____
 _____ Y or N _____
 _____ Y or N _____

MILITARY SERVICE

BRANCH	STATUS	EFFECTIVE DATE

EMPLOYMENT HISTORY

(List most recent employment first, use additional paper if necessary. If you were unemployed, please account for those time periods.)

COMPANY _____	TELEPHONE _____
ADDRESS _____	EMPLOYMENT DATES
POSITION HELD: _____	FROM _____ TO _____
SUPERVISOR'S NAME: _____	MO/YR MO/YR
DESCRIBE DUTIES PERFORMED _____	STARTING WAGE _____
_____	ENDING WAGE _____
_____	REASON FOR LEAVING: _____

COMPANY _____	TELEPHONE _____
ADDRESS _____	EMPLOYMENT DATES
POSITION HELD: _____	FROM _____ TO _____
SUPERVISOR'S NAME: _____	MO/YR MO/YR
DESCRIBE DUTIES PERFORMED _____	STARTING WAGE _____
_____	ENDING WAGE _____
_____	REASON FOR LEAVING: _____

COMPANY _____	TELEPHONE _____
ADDRESS _____	EMPLOYMENT DATES
POSITION HELD: _____	FROM _____ TO _____
SUPERVISOR'S NAME: _____	MO/YR MO/YR
DESCRIBE DUTIES PERFORMED _____	STARTING WAGE _____
_____	ENDING WAGE _____
_____	REASON FOR LEAVING: _____

COMPANY _____	TELEPHONE _____
ADDRESS _____	EMPLOYMENT DATES
POSITION HELD: _____	FROM _____ TO _____
SUPERVISOR'S NAME: _____	MO/YR MO/YR
DESCRIBE DUTIES PERFORMED _____	STARTING WAGE _____
_____	ENDING WAGE _____
_____	REASON FOR LEAVING: _____

COMPANY _____	TELEPHONE _____
ADDRESS _____	EMPLOYMENT DATES
POSITION HELD: _____	FROM _____ TO _____
SUPERVISOR'S NAME: _____	MO/YR MO/YR
DESCRIBE DUTIES PERFORMED _____	STARTING WAGE _____
_____	ENDING WAGE _____
_____	REASON FOR LEAVING: _____

If you desire to furnish additional information to describe your qualifications and experience that are relevant to the position you are applying for, you may use additional paper. Please ensure your name is on the additional paper.

Record of Conviction

During the last ten years, have you ever been convicted of a crime other than minor traffic offense? ___Yes or ___No
If yes, explain: _____

(A conviction will not necessarily disqualify you for employment.
Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered).

PERSONAL and PROFESSIONAL REFERENCES

PERSONAL References (List two people who you authorize NNOGC to contact to provide personal information about you.)

Name _____ Years Known _____ Telephone (required) _____
Address _____

Name _____ Years Known _____ Telephone (required) _____
Address _____

PROFESSIONAL References (List three people who you authorize NNOGC to contact to provide information about your work history and performance).

Name _____ Relationship: _____ Telephone (required) _____
Address _____ Profession: _____

Name _____ Relationship: _____ Telephone (required) _____
Address _____ Profession: _____

Name _____ Relationship: _____ Telephone (required) _____
Address _____ Profession: _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that that facts set forth in the above employment application are true and complete to the best of my knowledge, and I authorize Navajo Nation Oil & Gas Company to verify their accuracy and to obtain reference information on my work experience and performance. I hereby release Navajo Nation Oil & Gas Company from any and all liability of whatever kind and nature which, at any time, could result from obtaining such employment information.

I understand that falsified statements of any kind or omissions of facts in this application shall be considered as sufficient basis for dismissal if I become employed by NNOGC.

I understand should an employment offer be extended to me and if I accept, that I will abide by the policies, rules and regulations of employment of NNOGC. However, I further understand that neither the policies, rules, regulations of employment or anything discussed or said during that interview process shall be deemed to constitute an implied offer of employment or an employment contract. I understand that any employment offered is for an indefinite duration and that Navajo Nation Oil & Gas Company may terminate my employment at any time with or without cause.

Signature of Applicant _____ Date: _____



Navajo Nation Oil & Gas Company
PO Box 4439, Window Rock AZ 86515
West Hwy 264 & Crest Road, St. Micheals AZ 86511
Phone: 928-871-4880
Fax: 928-871-4882