PINEDALE CHAPTER PUBLIC EMPLOYMENT PROJECT POLICIES AND PROCEDURES FOR CHAPTER EXPENDITURES

I. PURPOSE

The purpose of the Public Employment Project Policies and Procedures is to provide guidance to chapters in administering Navajo Nation Public Employment Project funds where they lack P.E.P. policies and procedures of their own. The Navajo Nation appropriates these funds to:

- A. provide short-term employment for chapter residents to work on prioritized chapter projects.
- B. reduce the unemployment rate at the chapter and Navajo Nation level, and
- C. provide on-the-job training to selected chapter residents so they may obtain permanent employment with non-chapter employers.

II. DEFINITIONS

- A. "chapter administration" means the employees of the chapter which includes, but is not limited to, the chapter manager and clerk typist.
- *B. "chapter manager" means a chapter employee who performs the duties prescribed in 26 N.N.C. §§ 1004 (B), 1004 (C), and 2003 (B), and includes those employees referred to as community services coordinators.
- C. "Local Governance Act" means 26 N.N.C. §§ 1-2005.
- D. "participants" means chapter members participating in chapter-approved Public Employment Projects.

III. SELECTING, APPROVING, EXTENDING, ACCOUNTING, EMPLOYING AND POSTING REQUIREMENTS

- A. Each Navajo Nation chapter has discretion in selecting which Public Employment Project ("PEP") to pursue, subject only to applicable tribal laws. The chapter has the discretion to determine the length of each project and when to begin.
- B. All projects shall be duly approved by the chapter membership and set out in the annual budget.

- C. All projects shall be completed within the annual budget cycle, or an extension shall be reflected in the ensuing year's budget and approved by the chapter membership.
- D. The chapter administration shall make proper accounting and bookkeeping entries for all PEP allocations.
- E. For each project, the chapter administration may employ one or more participants subject to the availability of funds.
- F. The chapter administration may not hire members of the same household family such as parent and child or siblings for the period involved in one approved chapter project.
- G. The chapter administration shall develop an exact job description for each of its participants.
- H. Due to insurance liabilities, no one other than a chosen project participant may work on a project.
- I. The chapter administration shall select chapter supervisors and skilled participants based on experience, skill, and qualifications for the designated project. The chapter can utilize the Navajo Nation pay scales, or chapter pay scales where they exist, to pay these supervisors and skilled employees an appropriate wage.
- J. Chapter managers may replace participants when they fail to show up at work.
- K. The Navajo Preference in Employment Act, as amended, is binding on the selection, hiring, and all other aspects of the employment process at the local chapter.
- L. Participants shall not work more than eight (8) hours per day, 40 hours per week, or 80 hours per period. Additionally, participants may not make up for hours missed.
- M. The Chapter may allow participants to receive on-the-job training with an employer other than the chapter, so long as the chapter has entered into an agreement with the employer that describes the employer's intent to hire the participant on a permanent basis, the employer's contribution to the participant's wage, and the term of the training period.

- N. For each project, the chapter administration shall post notice that the chapter is accepting applications. That notice shall be made available two (2) weeks in advance and may be carried out as follows:
 - 1. By posting on the chapter bulletin board(s).
 - 2. By announcement in the media.
 - 3. By announcement at planning and chapter meetings.
 - 4. By posting in public and/or business sites within the area.
 - 5. By other means the chapter deems appropriate.

IV. PARTICIPANT QUALIFICATIONS AND EMPLOYMENT NOTICE

- A. Adult participants shall be registered voters of the chapter and not employed by another chapter.
- B. Community Youth (non-registered voters) participants between the ages of fourteen (14) and seventeen (17) are eligible by the following conditions shall be met:
 - 1. The applicable child labor laws of Arizona, New Mexico, or Utah are complied with.
 - 2. Parental consent is obtained using a standard consent form, prior to the date of employment. (See sample form attached hereto as Attachment A).
 - 3. There is no work-related travel.
 - 4. The youth are under close supervision at all times and do not work in hazardous occupations.
 - 5. The Navajo Occupational Safety and Health Administration (NOSHA) have assured that the working conditions and environment are safe.

V. PROJECT APPLICATION AND PROCEDURES

A. For each project, the chapter administration shall properly complete, date, and sign the project application, personnel roster, and employment and termination notice(s). (See Sample forms attached hereto as Attachment B). The chapter administration shall also include a copy of each participant's social security card. The chapter administration shall keep all of the above-mentioned

documents on file. All documents shall be completed and finalized prior to commencing the project.

- B. The project application shall include:
 - 1. The name of the project.
 - 2. The name of the project supervisor.
 - 3. The project location.
 - 4. The project start and end dates.
 - 5. The total number of project days.
 - 6. The total estimated cost of the project.
 - 7. The total amount of PEP funds to be utilized.
 - 8. The total number of personnel to be employed.
 - 9. The contact person (usually the clerk-typist or chapter manager).
 - 10. The chapter telephone number.
 - 11. The description of the project. This should include a description of the benefits to be derived from the project, the tasks to be performed under the project, the resources required for the project, the project readiness, a description of how the project will be monitored, and a description of any alternate projects the crew will work on should they finish before the designated date of completion.

VI. PAYROLL, TIMESHEETS, AND DEDUCTIONS

- A. At the end of each pay period, project supervisors shall submit to the chapter administration timesheets (see sample form attached hereto as Attachment C), weekly progress reports, and daily sign-in sheets.
- B. Upon receipt of the timesheets and before 5:00 p.m., the chapter administration shall check and verify the hours worked.
- C. For each participant, the chapter administration shall prepare the payroll, make the proper deductions which includes FICA, Medicaid, Federal Income Tax, Navajo Nation Worker's Compensation, and Unemployment Insurance.
- D. After payroll checks are completed, the chapter manager and secretary/treasurer shall sign the checks and if the secretary/treasurer is not available, the chapter manager and chapter president shall sign the checks. If the chapter president is not available, then the chapter manager and chapter vice-president shall sign the checks.

- E. Payroll checks shall be distributed according to the payroll schedules as set by the chapter administration.
- F. Payroll checks may be dispensed to the participant payee only, unless the participant-payee has signed a written authorization designating another person to pick up the check(s).
- G. At the end of each month, or as instructed by the Internal Revenue Service, the chapter administration shall deposit the payroll deductions into the bank.
- H. By the date set by the federal and state agencies, the chapter administration shall pay the federal and state unemployment taxes.
- I. By the end of each calendar year, the chapter administration shall issue W-2's to the participants who worked during the year, and shall submit W-3's to the Social Security Administration.

VII. EXPENDITURE REPORTING

- A. At the end of each month, the chapter administration shall prepare a written expenditure report which includes the beginning balance, wages, payroll journal, payroll deductions, IRS and Worker's Compensation fees, and the ending balance. The chapter administration shall keep this report in its records.
- B. At the end of each quarter, the chapter administration shall prepare a written expenditure report which includes the types of project and number of workers covered in the quarter and submit the report to its Local Governance Support Center.
- C. At the completion of each project the chapter administration shall prepare a final project evaluation report describing the completed project and have that report signed by the chapter president.

VIII. OVERSIGHT

A. The chapter manager shall have the day-to-day oversight responsibility for the administration of all Public Employment Project activities carried out by the chapter.

- B. The Local Governance Support Center shall have expenditure oversight and ensure that allocations are expended in accordance with Navajo Nation law.
- C. The Transportation and Development Committee of the Navajo Nation Council shall have the oversight responsibility for the operation of the Public Employment Project and the Local Governance Support Center's activities.

IX. AMENDMENTS

These policies and procedures may be amended by the Transportation and Community Development Committee.



PINEDALE CHAPTER



Employment Application

PLEASE PRINT ALL INFORMATION

	PERSON	AL INFORM	MATION		
SOCIAL SECURITY NUMBER	FIRST NAME		MIDDLE INITIAL	LAST NAME	
OTHER NAMES USED IF APPLICABLE	MAILING ADD	RESS	CITY	STATE	ZIP CODE
DRIVER'S LICENSE NUMBER TYPE	CDL OPERATOR	CLASS:	STATE	EXPIRATION DATE	E (MM/DD/YYYY)
TELEPHONE NUMBER	MESSAGE N	UMBER		E-MAIL ADDRESS	
ARE YOU A REGISTERED VOTER OF PINEDALE CHAPTI	ER?	IF YES, INDICA	TE CENSUS NUMBER	DATE OF	BIRTH (MM/DD/YYYY)
ARE YOU A VETERAN? YES NO If not previously submitted, please provide a copy of DD Form 214/215			TO CLAIM VETERANS' PF YES an Application for Veterans' Employ	NO NO	
HAVE YOU EVERY APPLIED TO THE CHAPTER BEF	ORE?		NO WHEN?		
是更是的情况的 的复数 医多种		N INFORM	ATION		
REQUISITION NUMBER	POSITION NU	JMBER		POSITION TITLE	
ARE YOU CURRENTLY EMPLOYED?	s NO	IF DO MAY WE CONTACT THEM?	□ YES □ NO		
A 15 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		DUCATION			
NAME AND LOCATION OF SCHOOL	0.0000000000000000000000000000000000000	ATTENDED IM/YY)	GED/DIPLOMA/DEGREE RECEIVED	MAJOR/I	MINOR
HIGH SCHOOL	FROM	то	KEGEWED		
7					
COLLEGE/UNIVERSITY					
COLLEGE/UNIVERSITY					
TECHNICAL/VOCATIONAL/BUSINESS SCHOOL					
LIST ADDITIONAL JOB RELATED TRAIL	NING - INCLUDE	DATES OF TRA	INING		
LIST JOB RELATED SKILLS:					
				-	

The PINEDALE CHAPTER gives preference to eligible and qualified applicants in accordance with the Navajo Preference in Employment Act

(NPEA) and the Veterans' Preference

NAME	ADDRESS	TELEPHONE NUMBER
TV.III.	ADDITEO	TEEL HOME NOMBER
ADDITIONAL E	MPLOYMENT INFO	
	H ADDITIONAL SHEET IF NECE	NO IF YES, GIVE DATE AND REASON SSARY
onviction does not automatically disqualify you, however, an i	ncomplete answer will result in	an incomplete application
HAVE YOU EVER BEEN CONVICTED OF A MISDEN		URPITUDE?*_
IF YES, GIVE D	DATE AND REASON	YES NO
CONVICTION DOES NOT AUTOMATICALLY DISQUALITY YOU, HOWEVER, AN IDO YOU HAVE ANY PHYSICAL CONDITION(S) WHICH MAY CHALLENGE YOUR PERFORM THE RESPONSIBILITIES OF THE JOB FOR WHICH YOU ARE APPLY INCOMPLETE ANSWER WIll result in an incomplete application	R ABILITY TO * YES	an incomplete application NO IF YES, GIVE BRIEF DESCRIPTION
VOLUME ATER TO ANYONE CURRENTLY FARRI OVER 1977	U THE DINEDALE CHARTER	□ VEC □ 110
YOU RELATED TO ANYONE CURRENTLY EMPLOYED WIT	I THE PINEDALE CHAPTER?	YES NO
		TIONSHIP:
ME/ TITLE: ME/ TITLE:		
EMPL (Do not indicate "See Resume"	OYMENT HISTORY . Begin with current	TIONSHIP: TIONSHIP:
ME/TITLE:	OYMENT HISTORY Description Dates EMPLOYED (MM/DD/YYYY)	TIONSHIP: TIONSHIP:
EMPL (Do not indicate "See Resume"	OYMENT HISTORY DATES EMPLOYED (MM/DD/YYYY) FROM TO	or most recent position.)
EMPL (Do not indicate "See Resume"	OYMENT HISTORY Description Dates EMPLOYED (MM/DD/YYYY)	or most recent position.)
EMPL (Do not indicate "See Resume"	OYMENT HISTORY DATES EMPLOYED (MM/DD/YYYY) FROM TO	or most recent position.)
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS DESCRIBE DUTIES AND	DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER	or most recent position.)
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER	or most recent position.)
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS DESCRIBE DUTIES AND	DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER	or most recent position.)
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER	or most recent position.)
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER	or most recent position.)
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS DESCRIBE DUTIES AND	DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER	or most recent position.)
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY) DATES EMPLOYED (MM/DD/YYYY) FROM 10 TELEPHONE NUMBER DATES EMPLOYED (MM/DD/YYYY)	or most recent position.)
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS ESCRIBE DUTIES AND RESPONSIBILITIES	PATES EMPLOYED I DATES EMPLOYED (MM/DD/YYYY) FROM TELEPHONE NUMBER IMMEDIATE SUPERVISOR:	TIONSHIP: TIONSHIP: Or most recent position.) JOB TITLE REASON FOR LEAVING
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS DESCRIBE DUTIES AND RESPONSIBILITIES	DATES EMPLOYED (MM/DD/YYYY) DATES EMPLOYED (MM/DD/YYYY) FROM 10 TELEPHONE NUMBER DATES EMPLOYED (MM/DD/YYYY)	TIONSHIP: TIONSHIP: Or most recent position.) JOB TITLE REASON FOR LEAVING
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS DESCRIBE DUTIES AND RESPONSIBILITIES	DATES EMPLOYED (MM/DD/YYYY) DATES EMPLOYED (MM/DD/YYYY) FROM DATES EMPLOYED (MM/DD/YYYY) DATES EMPLOYED (MM/DD/YYYY) FROM DATES EMPLOYED (MM/DD/YYYY) FROM TO	TIONSHIP: Or most recent position.) JOB TITLE REASON FOR LEAVING JOB TITLE
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS DESCRIBE DUTIES AND RESPONSIBILITIES EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER	TIONSHIP: Or most recent position.) JOB TITLE REASON FOR LEAVING JOB TITLE
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS DESCRIBE DUTIES AND RESPONSIBILITIES EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER	TIONSHIP: Or most recent position.) JOB TITLE REASON FOR LEAVING JOB TITLE
EMPL (Do not indicate "See Resume" EMPLOYER'S NAME AND MAILING ADDRESS ESCRIBE DUTIES AND RESPONSIBILITIES EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER DATES EMPLOYED (MM/DD/YYYY) FROM TO TELEPHONE NUMBER	TIONSHIP: Or most recent position.) JOB TITLE REASON FOR LEAVING JOB TITLE

EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY) EPOM TO		JOB TITLE	
	FROM	TO		
	TELEPHO	NE NUMBER	REASON FOR LEAVING	
	IMMEDIATE SUPE	RVISOR:		
ESCRIBE DUTIES AND	INNVEDITIE OUT E			
RESPONSIBILITIES				
Control of the second second	DATES EMPLOYED			
EMPLOYER'S NAME AND MAILING ADDRESS	DATES EMPLOYED (MM/DD/YYYY)		JOB TITLE	
	FROM	10		
	TELEPHO	NE NUMBER	REASON FOR LEAVING	
	IMMEDIATE SUPE	RVISOR:		
ESCRIBE DUTIES AND	INVINIEDIATE SUPE	IVVIOUR.		
RESPONSIBILITIES				
	Alexander (Mari			
EMPLOYER'S NAME AND MAILING ADDRESS		EMPLOYED	JOB TITLE	
EG LEVA HAME WAS MAINTENA APPLICAGE	(MM/E	DD/YYYY)	JOB III LE	
	TELEPHONE NUMBER		REASON FOR LEAVING	
			NEAGON FOR ELAVING	
	IMMEDIATE SUPE		NEAGONT ON EEAVING	
	IMMEDIATE SUPE		NEAGON FOR EEAVING	
	IMMEDIATE SUPE		NEAGON ON EEAVING	
ESCRIBE DUTIES AND RESPONSIBILITIES	IMMEDIATE SUPE		NEAGON ON EEAVING	
	IMMEDIATE SUPE		NEAGON ON EEAVING	
	IMMEDIATE SUPEI		NEAGONY ON EEAVING	
	IMMEDIATE SUPEI		NEAGON ON EEAVING	
		RVISOR:	NEAGON ON LEAVING	
	DATES E		JOB TITLE	
RESPONSIBILITIES	DATES E	RVISOR:		
RESPONSIBILITIES	DATES E (MM/D	RVISOR:		
RESPONSIBILITIES	DATES E (MM/D FROM TELEPHOI	EMPLOYED DDYYYY) 10 NE NUMBER	JOB TITLE	
EMPLOYER'S NAME AND MAILING ADDRESS	DATES E (MM/D	EMPLOYED DDYYYY) 10 NE NUMBER	JOB TITLE	
EMPLOYER'S NAME AND MAILING ADDRESS SCRIBE DUTIES AND	DATES E (MM/D FROM TELEPHOI	EMPLOYED DDYYYY) 10 NE NUMBER	JOB TITLE	
EMPLOYER'S NAME AND MAILING ADDRESS	DATES E (MM/D FROM TELEPHOI	EMPLOYED DDYYYY) 10 NE NUMBER	JOB TITLE	
EMPLOYER'S NAME AND MAILING ADDRESS	DATES E (MM/D FROM TELEPHOI	EMPLOYED DDYYYY) 10 NE NUMBER	JOB TITLE	
EMPLOYER'S NAME AND MAILING ADDRESS	DATES E (MM/D FROM TELEPHOI	EMPLOYED DDYYYY) 10 NE NUMBER	JOB TITLE	
EMPLOYER'S NAME AND MAILING ADDRESS SSCRIBE DUTIES AND RESPONSIBILITIES	DATES E (MM/D FROM TELEPHOI	EMPLOYED DDYYYY) TO NE NUMBER RVISOR:	JOB TITLE REASON FOR LEAVING	
EMPLOYER'S NAME AND MAILING ADDRESS ESCRIBE DUTIES AND RESPONSIBILITIES PRE-EMPLOYMENT STATEMENT - PLEAS	DATES E (MM/D) FROM TELEPHOI IMMEDIATE SUPER	EMPLOYED DDYYYY) 10 NE NUMBER RVISOR:	JOB TITLE REASON FOR LEAVING GN THE STATEMENT BELOW	
EMPLOYER'S NAME AND MAILING ADDRESS ESCRIBE DUTIES AND RESPONSIBILITIES PRE-EMPLOYMENT STATEMENT - PLEAS NFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS	DATES E (MM/D FROM TELEPHOI IMMEDIATE SUPER SE READ CAREF TRUE AND COMPLET	EMPLOYED DDYYYY) TO NE NUMBER RVISOR: ULLY AND SI TE TO THE BEST	JOB TITLE REASON FOR LEAVING GN THE STATEMENT BELOW OF MY KNOWLEDGE. ANY MISREPRESENTATION	
EMPLOYER'S NAME AND MAILING ADDRESS ESCRIBE DUTIES AND RESPONSIBILITIES PRE-EMPLOYMENT STATEMENT - PLEASE NEORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS SION OF ANY FACT IN MY APPLICATION, OR ANY OTHER MATERIALS	DATES E (MM/D FROM TELEPHOI IMMEDIATE SUPER SE READ CAREF TRUE AND COMPLET USED IN THE APPLICA	EMPLOYED DDYYYY) TO NE NUMBER RVISOR: ULLY AND SI TE TO THE BEST ATION PROCESS,	JOB TITLE REASON FOR LEAVING GN THE STATEMENT BELOW OF MY KNOWLEDGE. ANY MISREPRESENTATION OF INFORMATION OFFERED DURING ANY INTERV	
EMPLOYER'S NAME AND MAILING ADDRESS ESCRIBE DUTIES AND RESPONSIBILITIES PRE-EMPLOYMENT STATEMENT - PLEAS	DATES E (MM/D FROM TELEPHOI IMMEDIATE SUPER SE READ CAREF TRUE AND COMPLET USED IN THE APPLICA ED, TERMINATION FRO	EMPLOYED DDYYYY) TO NE NUMBER RVISOR: ULLY AND SI TE TO THE BEST ATION PROCESS, M EMPLOYMENT	JOB TITLE REASON FOR LEAVING GN THE STATEMENT BELOW OF MY KNOWLEDGE. ANY MISREPRESENTATION OR INFORMATION OFFERED DURING ANY INTERVIEW WITH THE PINEDALE CHAPTER. MY SIGNATURE B	
EMPLOYER'S NAME AND MAILING ADDRESS ESCRIBE DUTIES AND RESPONSIBILITIES PRE-EMPLOYMENT STATEMENT - PLEASE NEORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS SIGN OF ANY FACT IN MY APPLICATION, OR ANY OTHER MATERIALS BE JUSTIFICATION FOR REFUSAL OF EMPLOYMENT, OR IF EMPLOYE ORIZES THE PINEDALE CHAPTER TO CONTACT ANY OF MY PRIOR E	DATES E (MM/D FROM TELEPHOI IMMEDIATE SUPER SE READ CAREF TRUE AND COMPLET USED IN THE APPLIC/ USED IN THE APPLIC/ ED, TERMINATION FROM IMPLOYERS FOR REFE	MPLOYED DYYYY) TO NE NUMBER RVISOR: ULLY AND SI TE TO THE BEST ATION PROCESS, M EMPLOYMENT ERENCE PURPOS	GN THE STATEMENT BELOW OF MY KNOWLEDGE. ANY MISREPRESENTATION OF INFORMATION OFFERED DURING ANY INTERVINIT THE PINEDALE CHAPTER. MY SIGNATURE BES.	
EMPLOYER'S NAME AND MAILING ADDRESS ESCRIBE DUTIES AND RESPONSIBILITIES PRE-EMPLOYMENT STATEMENT - PLEASE NEORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS SION OF ANY FACT IN MY APPLICATION, OR ANY OTHER MATERIALS BE JUSTIFICATION FOR REFUSAL OF EMPLOYMENT, OR IF EMPLOYEE	DATES E (MM/D FROM TELEPHOI IMMEDIATE SUPER SE READ CAREF TRUE AND COMPLET USED IN THE APPLICA ED, TERMINATION FROM IMPLOYERS FOR REFE K, AND HEREBY AUT	WPLOYED DYYYY) TO NE NUMBER RVISOR: ULLY AND SI TE TO THE BEST ATION PROCESS, M EMPLOYMENT ERENCE PURPOS THORIZE PINEDA	JOB TITLE REASON FOR LEAVING GN THE STATEMENT BELOW OF MY KNOWLEDGE. ANY MISREPRESENTATION OR INFORMATION OFFERED DURING ANY INTERV WITH THE PINEDALE CHAPTER. MY SIGNATURE BES. LE CHAPTER TO INVESTIGATE MY BACKGROUN	
EMPLOYER'S NAME AND MAILING ADDRESS SCRIBE DUTIES AND RESPONSIBILITIES PRE-EMPLOYMENT STATEMENT - PLEASE S	DATES E (MM/D FROM TELEPHOI IMMEDIATE SUPER SE READ CAREF TRUE AND COMPLET USED IN THE APPLICA ED, TERMINATION FROM IMPLOYERS FOR REFE EK, AND HEREBY AUT ORD, WHETHER SAME	EMPLOYED DDYYYY) TO NE NUMBER RVISOR: ULLY AND SI TE TO THE BEST ATION PROCESS, M EMPLOYMENT ERENCE PURPOS THORIZE PINEDA EIS OF RECORD	GN THE STATEMENT BELOW OF MY KNOWLEDGE. ANY MISREPRESENTATION OR INFORMATION OFFERED DURING ANY INTERVIOUS WITH THE PINEDALE CHAPTER. MY SIGNATURE BES. LE CHAPTER TO INVESTIGATE MY BACKGROUND OR NOT, AND I RELEASE EMPLOYERS AND PER	
EMPLOYER'S NAME AND MAILING ADDRESS SCRIBE DUTIES AND RESPONSIBILITIES PRE-EMPLOYMENT STATEMENT - PLEASE S	DATES E (MM/D FROM TELEPHOI IMMEDIATE SUPER TRUE AND COMPLET USED IN THE APPLIC, ED, TERMINATION FRO MPLOYERS FOR REFE K, AND HEREBY AUT ORD, WHETHER SAMI ACCOUNT OF HIS/HER	EMPLOYED DDYYYY) TO NE NUMBER RVISOR: ULLY AND SI TE TO THE BEST ATION PROCESS, M EMPLOYMENT ERENCE PURPOS THORIZE PINEDA E IS OF RECORD FURNISHING SAI	GN THE STATEMENT BELOW OF MY KNOWLEDGE. ANY MISREPRESENTATION OR INFORMATION OFFERED DURING ANY INTERVIEW WITH THE PINEDALE CHAPTER. MY SIGNATURE BES. LE CHAPTER TO INVESTIGATE MY BACKGROUND OR NOT, AND I RELEASE EMPLOYERS AND PER ID INFORMATION.	
EMPLOYER'S NAME AND MAILING ADDRESS SCRIBE DUTIES AND RESPONSIBILITIES PRE-EMPLOYMENT STATEMENT - PLEASE PROFINE TO A PROPERTY OF MATERIALS REJUSTIFICATION FOR REFUSAL OF EMPLOYMENT, OR IF EMPLOYED CRIZES THE PINEDALE CHAPTER TO CONTACT ANY OF MY PRIOR EMPLOYED CRIZES THE PINEDALE CHAPTER TO CONTACT ANY OF MY PRIOR EMPLOYED CRIZES THE PINEDALE CHAPTER TO CONTACT ANY OF MY PRIOR EMPLOYED CRIZES THE PINEDALE CHAPTER TO CONTACT ANY OF MY PRIOR EMPLOYED CRIZES THE PINEDALE CHAPTER TO CONTACT ANY OF MY PRIOR EMPLOYED CRIZES THE PINEDALE CHAPTER TO CONTACT ANY OF MY PRIOR EMPLOYED CRIZES THE PINEDALE CHAPTER TO CONTACT ANY OF MY PRIOR EMPLOYED CONTACT ANY AND ALL INFORMATION OF CONCERN AS TO MY RECOMMENDED.	DATES E (MM/D FROM TELEPHOI IMMEDIATE SUPER SE READ CAREF USED IN THE APPLICA ED, TERMINATION FROM MPLOYERS FOR REFE EK, AND HEREBY AUT ORD, WHETHER SAMI ACCOUNT OF HIS/HER ATION OF MY PERSON	MPLOYED DYYYY) TO NE NUMBER RVISOR: ULLY AND SI TE TO THE BEST ATION PROCESS, M EMPLOYMENT ERENCE PURPOS THORIZE PINEDA E IS OF RECORD FURNISHING SAI NAL HISTORY, ED	GN THE STATEMENT BELOW OF MY KNOWLEDGE. ANY MISREPRESENTATION INFORMATION OFFERED DURING ANY INTERWITH THE PINEDALE CHAPTER. MY SIGNATURE ES. LE CHAPTER TO INVESTIGATE MY BACKGROUND OR NOT, AND I RELEASE EMPLOYERS AND PEND INFORMATION. DUCATIONAL BACKGROUND, MILITARY RECORD, MUCATIONAL BACKGROUND, MILITARY RECORD, MIL	

PAGE 3 OF 3

DATE

SIGNATURE _