MIAMI NATION OF OKLAHOMA APPLICATION FOR EMPLOYMENT

PERSONAL INF	ORMATION				DATE		
NAME (LAST, FIRS					SOCIAL SECU	RITY NUMBER	
PRESENT ADDRES	is			CITY		STATE	ZIP
PERMANENT ADD	RESS			CITY		STATE	ZIP
PHONE NO.				REFERRED BY			<u>I</u>
TRIBAL AF	FILIATION						
EMPLOYMENT	DESIRED						
POSITION	_		_	DATE YOU CAN	START	_	SALARY DESIRED
ARE YOU EMPLOYED ? YES		NO	<u> </u>	IF SO MAY WE IN YOUR LAST EMP			NO
HAVE VOILEVER	A DDI IED TO T	HIS COMPANY BEFORE?	WHERE?			WHEN?	
YES	AFFEILD TO	NO	WITERE:			WFILIN:	
EDUCATION H	ISTORY	ND LOCATION OF SCHOOL	YEARS	S ATTENDED	DID YC	OU GRADUATE?	SUBJECTS STUDIED
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SCHOOL							
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TRADE							†
SCHOOL							
GENERAL INFO	RMATION						
SUBJECTS OF SPE	CIAL STUDY/						
RESEARCH WORK	/TRAINING						
FORMER EMPLO	OYERS						
	ATE	NAME & ADDRESS OF	EMPLOYER	SALARY	POS	SITION	REASON FOR LEAVING
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		· · · · · · · · · · · · · · · · · · ·	TO MAKE ANY AGREEMENT CONTR	PARY TO THE
OREGOING, UNLESS IT IS	S IN WRITING AND S	IGNED BY AN AUTHORIZED C	OMPANY REPRESENTATIVE.	
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REMARKS	FOR DEPT.	POSITION	CHARACTER DATE	SALARY/WAGES

DATE

APPROVED