



Application for Employment

1 Mission Drive
PO Box 390
Winnebago, NE 68071
402.878.2809
Fax: 402.878.2560
www.hochunkinc.com

Position applied for _____ Dates available _____

Last Name _____ First Name(s) _____ Middle Initial _____

Mailing Address _____ City _____ State/Province _____ Zip/Postal Code _____

Telephone (include area code) _____ Fax _____ E-mail _____

Are you applying for: Full-time Part-time Temporary

How did you learn of this position? Posting Website Newspaper Employee

List specific site (i.e., SC journal, World-Herald, Employee Name, etc.): _____

Hours available: Mon _____ Tue _____ Wed _____ Thu _____ Fri _____ Sat _____ Sun _____

We are a Native American corporation. Are you Native American? Yes No

If yes, please list what tribe: _____

Please attach a copy of enrollment card or Certificate of Indian Blood.

EMPLOYMENT HISTORY: Please give accurate, complete information about any full-time or part-time employment starting with your current or most recent job first.

Position _____	Dates of employment _____ to _____
Employer _____	Address _____
Supervisor _____	Telephone _____
Pay: Start _____ End _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Responsibilities _____	
Reason for leaving _____	
Position _____	Dates of employment _____ to _____
Employer _____	Address _____
Supervisor _____	Telephone _____
Pay: Start _____ End _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Responsibilities _____	
Reason for leaving _____	
Position _____	Dates of employment _____ to _____
Employer _____	Address _____
Supervisor _____	Telephone _____
Pay: Start _____ End _____	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Responsibilities _____	
Reason for leaving _____	

