ELIGIBILITY FOR INDIAN PREFERENCE AND EQUAL EMPLOYMENT OPPORTUNITY WASÉYABEK DEVELOPMENT COMPANY, LLC

Date: _____ Position Desired: _____

All hiring and promotions within Waséyabek Development Company (WDC) shall include preference criteria, which will create employment opportunities and paths for promotions & training. This will increase management opportunities for qualified applicants and/or qualified employees who are Nottawaseppi Huron Band of the Potawatomi (NHBP) Tribal members, parents or spouses of NHBP Tribal members and enrolled members of other federally recognized Tribes. With this as an exception WDC is an equal opportunity employer and does not discriminate against any qualified applicants on the basis of genetics, age, race, color, gender, national origin, religion, pregnancy, handicap, or disability, veterans or veteran status.

In our efforts to assure compliance with legal mandates of Indian preference followed by all other equal opportunity qualifiers stated above, the following information is requested. This information will be maintained as confidential information apart from employment applications and personnel records. Please be assured that other than information that may be required to confirm your eligibility for Indian Preference, all other information you may provide is voluntary. If you are an enrolled Tribal Member of the Nottawaseppi Huron Band of the Potawatomi (NHBP); parent or spouse of a NHBP Tribal Member; or an enrolled member of another federally recognized Tribe, you must be able to provide verifiable documentation before you can receive preference.

Applicant	Infor	mation
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Name:				
Last	First	Ν	Middle	
Address:				
Street	City	State	Zip Code	
Phone Number(s):				
Home	Work	Cell		
Email:				

Tribal Preference (proof required)

Are you a NHBP Tribal Member? If yes, please provide a copy of your Tribal ID. Yes D No D

Are you currently married to a NHBP Tribal Member? If yes, please provide a copy of your spouse's Tribal ID, their Tribal Enrollment number and support evidence (i.e. marriage certificate, current joint tax return). Yes \Box No \Box

Are you the parent (biological or adoptive) of a minor NHBP Tribal Member that you financially support? If yes, please provide documentation (i.e. support order, verification from the NHBP Enrollment Department). Yes \Box No \Box

Are you an enrolled member of another federally recognized Tribe or an enrolled member of the Grand River Band of Ottawa or Burt Lake Band of Ottawa/Chippewa Indians? If yes, please answers the questions following. Yes \Box No \Box

- Tribal Affiliation: _____
- Contact person and phone number for verification of enrollment status:

• Tribal Enrollment number issued by the Tribal Government or Bureau of Indian Affairs and a copy of your Tribal ID/Enrollment card: _______ or a notarized letter or resolution from the Tribal Government Enrollment Office/Department (please attach).

Race/Ethnicity (check one)

- American Indian A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- □ Alaska Native (Not Hispanic or Latino) A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- □ Hispanic or Latino A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- □ White (Not Hispanic or Latino) A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- □ Black or African American (Not Hispanic or Latino) A person having origins in any of the black racial groups of Africa.
- □ Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- □ Asian (Not Hispanic or Latino) A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races.

Applicant's Signature:			Date:			
For Office Use Only:	Date Approved:	/		Approved by:		