

**Application for appointment to a Committee of the
Confederated Tribes
of the
*Umatilla Indian Reservation***

You should receive a copy of the Commission/Committee bylaws with this application.

I. This application must be completed by the applicant. The applicant must be an enrolled member of the Confederated Tribes, at least 18 years of age, and seeking an appointment to a Tribal commission or Committee. The application must be signed by the applicant and shall be submitted to the Tribal Office. Applications will be kept on file at the Tribal Office for a period of 12 months.

II. Application Questionnaire:

Name of Applicant: _____

Address: _____

Phone: _____ Enrollment No.: _____ DOB: _____

1. Name of Tribal Commission/Committee on which you wish to serve:

2. Do you meet the minimum qualifications for this Commission/Committee as listed in the attached bylaws? Please explain.

3. List training, education, and experience that demonstrates your ability and interest to serve the Tribe on the Commission/Committee:

4. List all Commissions and Committees on which you are currently serving and the date you term expires.

5. Do any of the Commissions or Committees on which you currently serve regularly meet at the same time as this Commission/Committee?

6. Do you have a reliable means of transportation to and from Commission/Committee meetings?

Yes No

7. Do you have adequate time available to devote to necessary Commission/Committee work?

Requirements are described in the Commission/Committee bylaws. Typically at least 6 hours per month are required, plus additional time for occasional related training sessions and travel.

Yes No

8. Are you a tribal employee? Yes No

If so, list your job title, program/department, and supervisor name.

Job title, program/department

Supervisor's name

9. Supervisor approval to serve on said Commission/Committee; pursuant to Section 2.13 (e) (1) of the Tribe's Personnel Manual.

Supervisor's Signature

Date

10. Do you have any work duties, personal relationships, or financial interest that might conflict with your duties as a Commission/Committee member?

Yes No If yes, please explain:

11. Do you have any relatives employed in the program that would be directly under the oversight of this Commission/Committee?

Yes No

If yes, please list such relative (s), their name(s), and your relationship to the person(s):

12. Do you owe money to the Tribe or have any financial interests in the department or program that would be under the oversight of the Commission/Committee?

13. Please briefly explain why you are interested in serving on this Commission/Committee?

14. If you wish to provide any additional statement, quality or reason supporting his/her application, please do so here:

Certification and Signature

The signatory below recognizes that the Board of Trustees may conduct a personal interview of the applicant on his/her ability and willingness to serve as a Commission or a Committee member and that the Board's appointment decision will be final. Furthermore, the applicant certifies that he/she meets the minimum qualifications for membership on the Commission or Committee. The applicant also certifies that, if he/she is selected to serve as a Commission or a Committee member that the applicant is willing to serve in that position, is willing to take the required oath of office, to accept the responsibility to complete any orientation or training required of Commission or Committee members, and to recognize and accept the governing authority of the Board of Trustees.

Signature of Applicant

Date

Authority for Release of Information

I have completed this statement with the knowledge and understanding that any or all items contained herein may be subject to investigation and I consent to the release of information concerning my capacity and fitness by employers, educational institutions, law enforcement agencies, and other individuals and agencies.

CERTIFICATION: I certify that all of the statements made by me are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.

Signature of Applicant

Date

⇒ The Board of Trustees sincerely appreciates the interest of all Tribal members in applying for positions of public Tribal responsibilities. It is through such service that the Board can conduct its business on behalf of the Tribe. All applicants will be notified of the Board's final decision. With your permission and in the event you are not selected at this time we shall keep your application on file for consideration for future Commission or Committee vacancies.

Received by BOT Secretary

Date