

**SITKA TRIBE OF ALASKA  
TRIBAL COUNCIL ELECTION**

*November 10, 2020*

**NOTICE OF CANDIDACY – TRIBAL COUNCIL MEMBER SEAT**

I, \_\_\_\_\_ hereby submit my Notice of Candidacy in the Sitka Tribe of Alaska Tribal Council election.

I state my eligibility:

- a) I am a duly enrolled citizen of Sitka Tribe of Alaska
- b) I am not enrolled at any other Tribal Government
- c) I am at least 30 (thirty) years of age
- d) I have lived in the Sitka area for the past twelve consecutive months
- e) I have not previously been removed from Tribal Council office

I further state that I have attached my completed **STA Criminal Background Inquiry for Tribal Council Candidates and Election Officials**. I understand I will be screened to ensure I have not been found guilty or entered a plea of no contest to any felony crime or any crime involving a sexual offense.

**Please print Clearly**

<b>Full Legal Name:</b>	
<b>Physical Address:</b>	
<b>City, State, Zip:</b>	
<b>Mailing Address:</b>	
<b>City, State, Zip:</b>	
<b>Contact Phone Number:</b>	
<b>Email Address:</b>	
<b>Date of Birth:</b>	
<b>Tribal Enrollment #</b>	

I certify that the following information is accurate. I understand that any omission or found falsification will remove me from current and future STA position consideration. I also understand that if I do not meet the suitability requirements of the position for which I am applying, any offer of employment will be withdrawn, or my employment will be terminated. I certify, under penalty of perjury that all information provided in this application for suitability is true.

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

**Return this form to the election supervisor on or before 4:30pm on Friday, October 09, 2020**

\*\*\*\*\* FOR ELECTION SUPERVISOR TO COMPLETE \*\*\*\*\*

\_\_\_\_\_  
Election Supervisor Signature

\_\_\_\_\_  
Date (required)

Date Received: \_\_\_\_\_

Time Received: \_\_\_\_\_



Sitka Tribe of Alaska  
 456 Katlian Street  
 Sitka, AK 99835  
 (800) 746-3207  
 (907) 747-3207  
 (907) 747-4915 (fax)  
 www.sitkatribes.org

## Criminal Background Inquiry for Tribal Council Candidates & Election Officials

**All information provided is considered confidential, will only be used only for election purposes, and will not be released without the express written consent of the applicant.**

**PLEASE READ AND SIGN THE FOLLOWING STATEMENTS:**

\_\_\_\_\_  
 Name

\_\_\_\_\_  
 Position(s) applying for

I certify that the following information is accurate. I understand that any omission or found falsification will remove me from current and future STA position consideration. I also understand that if I do not meet the suitability requirements of the position for which I am applying, I will not be eligible for appointment by the Tribal Council. I certify, under penalty of perjury that all information provided in this application for suitability is true.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

I grant STA permission to conduct a background and character investigation. I understand that a criminal history record check is a condition of appointment. I understand that if I fail to sign, I will be removed from consideration from the position which I am applying.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

**\*\*\* For each following section, if additional space is needed, please attach additional pages, labeled with the appropriate Section Number.\*\*\***



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**SECTION 1---GENERAL**

<b>Last Name</b>	<b>Middle Name</b>	<b>First Name</b>
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If you don't have a middle name, enter "NMN" and if you are a Jr, Sr, II, etc enter in the space next to middle name.  
If you have only initials in your name, please use them.

**Maiden name or other names used**

<b>Place of birth:</b> <b>City</b>	<b>State</b>	<b>Country</b>
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<b>Are you US citizen?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Date of Birth</b>	<b>Social Security Number</b>
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**SECTION 2—RESIDENCE. Please list all places where you have lived for the past ten years.**

<b>Current Address</b>	
<b>Month and Year of residence</b> From      to	<b>City/State/ Zip</b>

<b>Previous Address 1</b>	
<b>Month and Year of residence</b> From      to	<b>City/State/ Zip</b>

<b>Previous Address 2</b>	
<b>Month and Year of residence</b> From      to	<b>City/State/ Zip</b>

<b>Previous Address 3</b>	
<b>Month and Year of residence</b> From      to	<b>City/State/ Zip</b>

<b>Previous Address 4</b>	
<b>Month and Year of residence</b> From      to	<b>City/State/ Zip</b>

<b>Previous Address 5</b>	
<b>Month and Year of residence</b> From      to	<b>City/State/ Zip</b>



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### SECTION 3 – Criminal Record

#### Felony

Have you ever been convicted of a felony?  Yes  No If yes please provide details below.

Charge:

Disposition

Location

Date:

#### Misdemeanor

Have you ever been convicted of a misdemeanor?  Yes  No If yes please provide details below.

Charge

Disposition

Location

Date:

#### Misdemeanor

Have you ever been convicted of another misdemeanor?  Yes  No If yes please provide details below.

Charge

Disposition

Location

Date:

#### Pending

Do you currently, or have you ever had any felony or misdemeanor charges pending?  Yes  No  
If yes please provide details below.

Charge:

Disposition

Location

Date:



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#### SECTION 4--MILITARY INFORMATION

Have you ever served in the Armed Forces?

Yes  No

If yes, please complete the information below and attach a copy of your DD-214 discharge form with this application

Branch

Location

Dates of service

From to

Type of discharge

#### SECTION 5 - COURT ORDER INFORMATION

Are you currently subject to a court order issued after a hearing which restrains you from harassing, stalking, or threatening an intimate partner or child(ren)?

Yes  No

If yes, please provide the name and location of the court which issued the order.

Please provide the date the order was issued:

**DISCLOSURE AND AUTHORIZATION**  
**[IMPORTANT – PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]**  
**DISCLOSURE REGARDING BACKGROUND INVESTIGATION**

Employer (The Company) may obtain information about you for employment purposes from a third party consumer reporting agency. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying. You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of any investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by Pinnacle Investigations, 1101 N. Argonne, Suite A201, Spokane Valley, WA 99212, Phone: 800-955-5306; Fax: 866-934-9070, [www.pinnacleprof.com](http://www.pinnacleprof.com), or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

**ACKNOWLEDGMENT AND AUTHORIZATION**

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by Pinnacle Investigations, 1101 N. Argonne, Suite A201, Spokane Valley, WA 99212, 800-955-5306, [www.pinnacleprof.com](http://www.pinnacleprof.com), another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

Employer: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**BACKGROUND INFORMATION**

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Other Names/Alias \_\_\_\_\_

Social Security\* # \_\_\_\_\_ Date of Birth\* \_\_\_\_\_

Driver's License # \_\_\_\_\_ State of Driver's License\*\* \_\_\_\_\_

Phone Number \_\_\_\_\_

Present Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Other Cities/States lived in the Past 7 Years: \_\_\_\_\_

\*This information will be used for background screening purposes only and will not be used as hiring criteria.

*Para información en español, visite [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.*

### **A Summary of Your Rights Under the Fair Credit Reporting Act**

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identify theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed

or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:**

**TYPE OF BUSINESS:**

1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.

b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:

2. To the extent not included in item 1 above:

a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks

b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act

c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations

d. Federal Credit Unions

3. Air carriers

4. Creditors Subject to Surface Transportation Board

5. Creditors Subject to Packers and Stockyards Act, 1921

6. Small Business Investment Companies

7. Brokers and Dealers

8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations

9. Retailers, Finance Companies, and All Other Creditors Not Listed Above

**CONTACT:**

a. Consumer Financial Protection Bureau  
1700 G Street NW  
Washington, DC 20552

b. Federal Trade Commission: Consumer Response Center – FCRA  
Washington, DC 20580  
(877) 382-4357

a. Office of the Comptroller of the Currency  
Customer Assistance Group  
1301 McKinney Street, Suite 3450  
Houston, TX 77010-9050

b. Federal Reserve Consumer Help Center  
P.O. Box 1200  
Minneapolis, MN 55480

c. FDIC Consumer Response Center  
1100 Walnut Street, Box #11  
Kansas City, MO 64106

d. National Credit Union Administration  
Office of Consumer Protection (OCP)  
Division of Consumer Compliance and Outreach (DCCO)  
1775 Duke Street  
Alexandria, VA 22314

Asst. General Counsel for Aviation Enforcement & Proceedings  
Aviation Consumer Protection Division  
Department of Transportation  
1200 New Jersey Avenue, SE  
Washington, DC 20590  
Office of Proceedings, Surface Transportation Board  
Department of Transportation  
395 E Street S.W.  
Washington, DC 20423

Nearest Packers and Stockyards Administration area supervisor

Associate Deputy Administrator for Capital Access  
United States Small Business Administration  
409 Third Street, SW, 8th Floor  
Washington, DC 20416

Securities and Exchange Commission  
100 F St NE  
Washington, DC 20549

Farm Credit Administration  
1501 Farm Credit Drive  
McLean, VA 22102-5090

FTC Regional Office for region in which the creditor operates or  
Federal Trade Commission: Consumer Response Center – FCRA  
Washington, DC 20580  
(877) 382-4357