

# KEWEENAW BAY INDIAN COMMUNITY

Keweenaw Bay Tribal Center  
16429 Beartown Road  
Baraga, Michigan 49908  
Phone (906) 353-6623  
Fax (906) 353-7540

## 2022 TRIBAL COUNCIL

KIM KLOPSTEIN, President  
SUSAN J. LAVERNIER, Vice President  
TONI J. MINTON, Secretary  
DON MESSER, Assistant Secretary  
RANDALL R. HAATAJA, Treasurer

DOREEN G. BLAKER  
ROBERT "R.D." CURTIS, JR.  
EDDY EDWARDS  
SUE ELLEN ELMBLAD  
ELIZABETH "LIZ" JULIO  
GARY F. LOONSFOOT, JR.  
RODNEY LOONSFOOT

## VAN/DELIVERY DRIVER

On-call, Non-exempt position

**ALL REQUIRED DOCUMENTATION MUST BE SUBMITTED BY THE CLOSING DATE OR THE APPLICANT WILL NOT BE CONSIDERED FOR EMPLOYMENT**

- ☐ Completed Keweenaw Bay Indian Community application
  - ☐ Copy of High School Diploma or Equivalent
- OR**
- ☐ If you are a KBIC member working towards obtaining your GED, you must provide verification
  - ☐ Copy of valid, unrestricted Michigan driver's license  
(See qualifications for driving privileges during employment).
  - ☐ If you are American Indian, you must attach a copy of tribal enrollment or proof of descendency
  - ☐ If you are a Veteran, you must attach a copy of your DD214

Keweenaw Bay Indian Community  
Personnel Department  
16429 Beartown Road  
Baraga, MI 49908  
Phone: 906-353-6623, ext. 4140 or 4176  
Fax: 906-353-8068  
Email: [personnel@kbic-nsn.gov](mailto:personnel@kbic-nsn.gov)

**Keweenaw Bay Indian Community does not discriminate based on race, color, national origin, sex, religion, or age in employment. However, individuals of Indian Ancestry and Veterans will be given preference by law.**

LAKE SUPERIOR BAND OF CHIPPEWA INDIANS

"Home of the Midnight Two-Step Championship"

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**POSITION ANNOUNCEMENT**

DOREEN G. BLAKER  
ROBERT "R.D." CURTIS, JR.  
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**POSITION:**

**VAN/DELIVERY DRIVER**

On-Call, non-exempt position

**LOCATION:**

Ojibwa Senior Citizens Center  
Baraga, MI

**SUPERVISORY CONTROL:**

Elderly Nutrition Director

**SALARY:**

Grade 3 (minimum starting wage = \$15.00/hour)

**SUMMARY:**

Transports Senior Citizens participating in the Elderly Nutrition Program and delivers meals prepared for home-bound seniors.

**QUALIFICATIONS:**

- Must have a High School Diploma, GED, or Certificate of Completion.
  - This qualification may be waived for individuals 55 years of age or older who meet the remainder of the qualifications listed below.
  - This qualification may also be waived for KBIC members working toward obtaining their GED who meet the remainder of the qualifications listed below. (Applicants must obtain their GED within one year of hire and progress reports must be provided quarterly to the Department Director and Personnel Director).
- Must be at least 21 years of age, have valid, unrestricted Michigan driver's license and be insurable to operate fleet vehicles. Must sign KBIC Driving Record Check form.
- Must possess CPR certification or obtain within 90 days.
- Employment is contingent upon the satisfactory result of a Security Background Check, pre-employment drug testing, and pre-employment physical.

**INDIAN PREFERENCE:**

Preference will be given to qualified individuals of American Indian descent.

**VETERAN PREFERENCE:**

Preference will also be given to Veterans who do not have bad conduct or dishonorable discharges (need DD214).

**MANDATORY REQUIREMENT:**

CPR Training

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**DUTIES AND RESPONSIBILITIES:**

- Arrange and set up meals for home delivery.
- Delivers meals to elders of the tribe.
- Keep the van clean, washed, and maintained regularly.
- Check tires, oil, etc., daily.
- Assist cook when needed and check-in with the cook at the end of shift.
- Other duties as assigned by the supervisor.

*This position announcement summary is intended to indicate the kinds of tasks which will be required of this position and shall not be construed as declaring what the specific duties and responsibilities of the position will be. It is not intended to limit or modify the right of the supervisor to assign, direct and control the work of this position, nor to exclude other similar duties not mentioned that are of similar kind or level difficulty.*

**Distribution Date:** October 21, 2022

**Closing Date:** Open Continuously

TERO approved: Debra G. Pucian  
Reviewed for barriers only!  
Date: 10/21/2022

**DRIVING RECORD CHECK FORM**

Position applying for or current position held: \_\_\_\_\_

Department: \_\_\_\_\_

Is driving required for this position: \_\_\_\_\_

**4.5 Driving Record:** All newly hired and current employees are required to provide a copy of their driver's license, commercial driver's license (CDL) or chauffeur license or provide the status if none or not valid and sign a consent form for the Community to enroll them and to obtain access to their personal driving record. As a condition of employment, each employee is required to be insurable according to their position description and the Tribe's current insurance carrier/agent. The Personnel department shall maintain a list of employees eligible to drive a fleet vehicle and a list of employees that are excluded. Excluded employees may not drive the Community's fleet vehicles. The Personnel Department shall enroll each newly hired or current employee through the Michigan Department of State subscription service. The enrollment shall include the employee's name, their driver's license number, CDL, or chauffeur's license, along with their date of birth. The Community will be provided a driving record of all employee(s) when they are first enrolled and then whenever there are any violations, restrictions, suspensions, or revocations posted to their record. Reports will be obtained at least annually.

\*\*\* Current insurance carrier requires all drivers of KBIC fleet vehicles be **at least 21 years of age**.

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

☐ I have read KBIC Driving Record Policy 4.5 and consent to a record check on my license Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Driver's license number: \_\_\_\_\_

☐ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature \_\_\_\_\_

Or

☐ I do not have a valid license as of Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Reason: \_\_\_\_\_

Signature \_\_\_\_\_

By signing this document you are agreeing that you have read and understand the policy and how it pertains to you as an employee of the KBIC.

Personnel Use only

☐ Copy of license

☐ Copy of personal vehicle insurance coverage