GRAND TRAVERSE BAND OF OTTAWA AND CHIPPEWA INDIANS

Pursuant to Public Act 68 of 1993 and/or Public Act 83 of 1995, I

_______________________________________, Represent that (check one)

( ) 1. I have not been convicted of, or pled guilty or nolo contendere (no contest), to any crime(s)
and/or misdemeanor(s).

( ) 2. I have been convicted of or pled guilty or nolo contendere (no contest) to the following crime(s)
and/or misdemeanor(s) (use separate sheet to explain nature of conviction, date and court):

   a. ________________________________________________________________________

   b. ________________________________________________________________________

   c. ________________________________________________________________________

I understand and agree that pursuant to Public Act 68 of 1993 and/or Public Act of 1995:

   (1) The Grand Traverse Band of Ottawa and Chippewa Indians (employer must
       request a criminal history check on me from the Central Records Division of
       the Michigan Department of State Police and/or the Federal Bureau of
       Investigation (FBI);

   (2) Until that report is received and reviewed by the Grand Traverse Band, if the
       Grand Traverse Band employs me, that employment is conditional and I am
       regarded as a conditional employee, and

   (3) If the report received from the Michigan Department of State Police or the
       FBI is not the same as my representation(s) above respecting either the
       absence of any conviction(s) or any crime(s) of which I have been convicted,
       my employment is voidable at the option of the Grand Traverse Band of
       Ottawa and Chippewa Indians. If the Grand Traverse Band discontinues my
       employment (and any attendant contractual statutory and/or common law
       rights) shall be considered terminated and the Grand Traverse Band of Ottawa
       and Chippewa Indians, it’s Tribal Council, administrators, employees and
       agents shall not be liable for the termination of my employment.

Signature__________________________________ Date__________________________