

EMPLOYMENT APPLICATION

MUST BE 18 YEARS OF AGE AND A GRADUATE OF HIGH SCHOOL.

"APPLICABLE LAW PROHIBITS DISCRIMINATION IN EMPLOYMENT BECAUSE OF RACE, COLOR, RELIGION, AGE, SEX, NATIONAL ORIGIN, OR VETERAN STATUS, DISABILITY OR ANY OTHER LEGALLY PROTECTED STATUS, EXCEPT AS NECESSARY TO IMPLEMENT AMERICAN INDIAN PREFERENCE."

TELL US ABOUT YOURSELF



Last Name:	First Name:	Middle Initial:
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Have you ever worked or attended school under another name that we need to know to verify your records?
If yes, Name:

Present Address:

City:	County:	State:	Zip:
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Telephone:	How long a resident in this area?
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Social Security Number: _____ / _____ / _____	Do you have a legal right to remain and work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No If hired you may be required to show legal proof of age.	Are you an American Indian? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, with which tribe are you registered?
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Have you ever worked for Konocti Vista Casino before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, dates and reason for leaving position or location:
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Under what name:

EMPLOYMENT AVAILABILITY

Position Desired:	Date you can start:
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Schedule Preferred: (circle one) Full Time Part Time	Desired Salary:
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Please state days or times you cannot work:

Do you now have or plan to have other employment while employed with Konocti Vista Casino?

EMPLOYMENT HISTORY

Employer:	Starting Position:	Ending/Current Position:
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Address:	Starting Salary	Ending/Current Salary:
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Phone:	Supervisor Name:	Dates of Employment: From _____ To _____
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Reason for leaving:	May we contact? Yes _____ No _____
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Employer:	Starting Position:	Ending/Current Position:
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Address:	Starting Salary	Ending/Current Salary:
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Phone:	Supervisor Name:	Dates of Employment: From _____ To _____
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Reason for leaving:	May we contact? Yes _____ No _____
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Employer:	Starting Position:	Ending/Current Position:
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Address:	Starting Salary	Ending/Current Salary:
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Phone:	Supervisor Name:	Dates of Employment: From _____ To _____
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Reason for leaving:	May we contact? Yes _____ No _____
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TELL US ABOUT ANY SPECIAL SKILLS YOU HAVE

Please indicate any other experience, skills certification, or awards which you may feel may be important in helping us make our decision:

TELL US ABOUT YOUR EDUCATION AND TRAINING

	Name & Location of School	Graduated Y/N	Degree
High School			
University/College Undergraduate			
University/College Graduate			
Trade/Business or Correspondence			

REFERENCES

Name:	Relationship To Reference:	
Title:	Phone Number:	Years Known:
Name:	Relationship To Reference:	
Title:	Phone Number:	Years Known:
Name:	Relationship To Reference:	
Title:	Phone Number:	Years Known:

PERSONAL INFORMATION

Have you ever been convicted of, plead guilty or no contest to, or received deferred adjudication on a criminal charge? Yes No
 If yes, please explain (Dates, Location, Charge): _____

Do you have a relative in our employ? Yes No
 If yes, Location, Position, Name: _____

How were you referred to Konocti Vista Casino
 Newspaper Website Agency (name) _____ (contact person) _____

Employee referral: (name of employee) _____ Other _____

In case of emergency notify:
 Name: _____ Phone: _____

Notice to applicants as required by the Fair Credit Reporting Act

In connection with your employment application, an investigative consumer report for the purpose of evaluating your suitability for employment will be made. If a decision to deny employment is based on information in a credit report, you will be notified, along with the name and address of the credit bureau making the report.

Agreement: (Please read carefully before signing) :

This Company is an equal opportunity employer, and selects individuals best matched for the job based upon job-related qualifications regardless of race, religion, color, creed, sex, national origin, age, disability, or any other status or characteristic protected by law.

I understand that completion of this application does not indicate that there are any positions open and does not in any way obligate this company to hire or offer me a job.

In the processing of my employment application, an investigation may be conducted whereby information and references will be requested from former employers. Permission is hereby granted to any school, person, firm, or corporation, whether my former employer or otherwise, to give this Company any relevant information that may be required by the necessary Company to arrive at an employment decision and I hereby release this Company, its officers, employees, representatives, or agents, from any and all liability and/or damage incurred by myself in accessing or using such information.

I understand that as a matter of Company policy, my employment and compensations shall only continue so long as mutually agreeable, and may be terminated by the Company or me without cause or advance notice. No manual, policy or statement by any Company representative (other than a formal agreement signed by the company and me) is to be considered a contract of employment, whether express or implied, for any specific period of time or upon any continuing term.

This Company reserves the right to use any method of investigation which, in its sole discretion it deems reasonable and necessary to determine whether any employee has engaged in conduct warranting disciplinary action. As a condition of employment, if hired, I agree to cooperate in any investigation. As a condition of my employment, I voluntarily agree to cooperate in consenting and submitting to any urine or blood tests requested by the Company, to enforce its drug and alcohol policy, as well as any searches of my person or property while employed by the Company, and I recognize that refusal to cooperate in such tests or searches would be grounds for discipline, including termination.

I understand that if hired, my employment may be terminated by the Company due to misrepresentation or inaccuracy of the statements contained on the Application for Employment. I authorize the Company to investigate all statements contained in this application for accuracy and completeness, and to obtain any transcripts, records, or documents pertaining to my background and business experience, as required by the Company. If hired, I agree to conform to the rules and regulations of this Company as issued from time to time. I also attest that I am authorized to work in the United States.

I understand this application will remain active for thirty (30) days, and if I have not been hired by that date, I must renew my application to be considered for future employment.

Check Box

Check Box I understand if hired I will be working in a smoking environment. I understand that I may be asked to stand or walk for long periods of time during my shift.

Signature _____ Date _____