

SPIRIT MOUNTAIN CASINO

APPLICATION FOR EMPLOYMENT

FORT MOJAVE TRIBE IDENTIFICATION NUMBER _____

IMPORTANT: Fill out the application accurately and completely. All statements in your application are subject to verification. Incorrect statements or omissions may bar or remove you from employment.

PRINT ANSWERS TO ALL QUESTIONS

An Equal Opportunity Employer M/F

1. Name					2. Telephone	
Last		First		Middle	Home	_____
3. Present Address					4. Are you 21 or over?	
Number Street		City	State	Zip	How Long?	Yes _____ No _____
5. Former Address					6. Social Security Number	

GENERAL INFORMATION

7. I wish to apply for a job as:		a. _____	8. What rate of pay			
		b. _____	would you accept S _____			
9. I am available for the following days of the week:			10. I am available for the following shifts:			
Any _____	Only (specify) _____	Day _____	Swing _____	Graveyard _____		
11. Have you ever applied at the Spirit Mountain Casino			All Shifts _____			
before? Yes _____	No _____	Dates _____				
Have you ever worked at the Spirit Mountain Casino			12. List any licenses or special permits you			
before? Yes _____	No _____	Dates _____	may have: _____			
13. If you ever worked under another last name?						
Please indicate name(s): _____			14. List any office/computer equipment you			
			know how to operate: _____			
15. If you are not a U.S. Citizen, do you have the						
legal right to work and remain permanently in						
the United States? Yes _____			No _____			
Alien Registration No. _____						
16. Activities other than religious (civic, athletic, fraternal, etc.). Exclude organizations which indicate the age, race, creed, color or national origin of its members. _____						
17. I was referred to Spirit Mountain Casino by: Friends _____ Employees _____ State Employment _____						
Newspaper Advertisement _____		Radio Advertisement _____		Other _____		
18. Have you ever been convicted of a crime, other than traffic violations? Yes _____ No _____						
If yes, please give dates, locations and disposition of the convictions _____						

BONDING INFORMATION

YOUR POSITION MAY REQUIRE YOU TO BE BONDABLE.
THE INFORMATION BELOW IS REQUIRED BY THE BONDING COMPANY.

19. Have you ever been refused a bond or had a bond cancelled? Yes _____ No _____

If Yes, specify: _____

EDUCATION

20. Name of School	Location (City and State)	Circle Highest Grade Completed				Graduate?	
		9	10	11	12	Yes _____	No _____
High School							
College		Fr.	So.	Jr.	Sr.	Yes _____	No _____
Other Training	Do you plan to continue school?					When? Month and Year	
Military Service? Yes _____ No _____		Date Discharged _____					

REFERENCES

21. LIST TWO: DO NOT INCLUDE RELATIVES OR FORMER EMPLOYERS.

a.	Name	Address	City and State	Occupation
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____

22. Do you have personal friends or relatives working at Spirit Mountain Casino? Yes _____ No _____

If yes, list:

a.	Name	Relationship	Position Held
a.	_____	_____	_____
b.	_____	_____	_____

WORK EXPERIENCE

23. BEGINNING WITH YOUR PRESENT AND/OR PAST POSITION, LIST ALL PERIODS OF EMPLOYMENT OR UNEMPLOYMENT FOR THE PAST TEN YEARS. SUPPLEMENTAL SHEET IS AVAILABLE.

COMPANY	DATES OF EMPLOYMENT		JOB DESCRIPTION
Name	From Month	Year	Job Title:
Address	To Month	Year	Reason for Leaving:
City State	Wages \$		Your Supervisor's Name
Telephone No.	Per		
Name	From Month	Year	Job Title:
Address	To Month	Year	Reason for Leaving:
City State	Wages \$		Your Supervisor's Name
Telephone No.	Per		
Name	From Month	Year	Job Title:
Address	To Month	Year	Reason for Leaving:
City State	Wages \$		Your Supervisor's Name
Telephone No.	Per		

24. READ THE FOLLOWING STATEMENT CAREFULLY AND ACKNOWLEDGE WITH YOUR SIGNATURE

I understand Spirit Mountain Casino's only employs those who possess the legal right to work in the United States (U.S. Citizens and aliens authorized to work in the United States). I acknowledge in my signature below that I possess such legal rights.

By making this application, I hereby authorize Spirit Mountain Casino to investigate my past record and to ascertain any and all information which may concern my record and character, whether or not such information is on the records of previous employers, references, or any other party. I hereby release said companies and individuals from any liability for any damages whatsoever resulting from the giving of such information. I understand, if employed, any false information or omission contained in this application is cause for immediate discharge.

Additionally, I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Spirit Mountain Casino and me for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand no such promise or guarantee is binding upon Spirit Mountain Casino's unless made in writing. If any employment relationship is established, I understand that my employment is for no definite period of time, that I am at-will employee, that I have the right to terminate my employment with or without cause at any time, and that Spirit Mountain Casino's retains a similar right. Also, if employed, I agree to any debts which I incur to the Company may be withheld from my wages as provided by law.

Applicant's Signature: _____ Date of Application: _____ Front Desk Signature: _____

WORK EXPERIENCE (Continuation Sheet)

26. LIST ADDITIONAL PERIODS OF EMPLOYMENT (INCLUDING U.S. MILITARY SERVICE) OR UNEMPLOYMENT FOR THE PAST 10 YEARS:

COMPANY		DATES OF EMPLOYMENT		JOB DESCRIPTION
Name		From Month	Year	Job Title:
Address		To Month	Year	Reason for Leaving:
City	State	Wages \$		
Telephone No.		Per		Your Supervisor's Name
Name		From Month	Year	Job Title:
Address		To Month	Year	Reason for Leaving:
City	State	Wages \$		
Telephone No.		Per		Your Supervisor's Name
Name		From Month	Year	Job Title:
Address		To Month	Year	Reason for Leaving:
City	State	Wages \$		
Telephone No.		Per		Your Supervisor's Name
Name		From Month	Year	Job Title:
Address		To Month	Year	Reason for Leaving:
City	State	Wages \$		
Telephone No.		Per		Your Supervisor's Name
Name		From Month	Year	Job Title:
Address		To Month	Year	Reason for Leaving:
City	State	Wages \$		
Telephone No.		Per		Your Supervisor's Name
Name		From Month	Year	Job Title:
Address		To Month	Year	Reason for Leaving:
City	State	Wages \$		
Telephone No.		Per		Your Supervisor's Name
Name		From Month	Year	Job Title:
Address		To Month	Year	Reason for Leaving:
City	State	Wages \$		
Telephone No.		Per		Your Supervisor's Name
Name		From Month	Year	Job Title:
Address		To Month	Year	Reason for Leaving:
City	State	Wages \$		
Telephone No.		Per		Your Supervisor's Name

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RELEASE CRIMINAL HISTORY, EMPLOYMENT & MEDICAL HISTORY

This release allows both conviction and non-conviction data, as well as employment and medical history data to be released to the prospective employer listed below.

I, _____, having made application with the Spirit Mountain Casino for employment, authorize the release of any record of criminal history, employment or medical history pertaining to me. I hereby release the Mojave Tribal/Arizona Gaming Commission, and it's employees and any previous employers from any damage or liability in furnishing any records they submit to the above listed prospective employer.

Signature _____

Date of Birth _____

Social Security Number _____

Witness _____

Sheriff Card Number _____