



Employment Application

Internal use ONLY
Date received in H.R.

POSITION(s) DESIRED:

Please indicate in order of interest.

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Please indicate shifts you are available to work:

- | | | |
|------------------------------------|------------------------------|--------------------------------|
| <input type="checkbox"/> FULL TIME | <input type="checkbox"/> ALL | <input type="checkbox"/> SWING |
| <input type="checkbox"/> PART TIME | <input type="checkbox"/> DAY | <input type="checkbox"/> GRAVE |

NAME:

(Last)

(First)

(Middle)

BELOW LIST ANY OTHER NAMES YOU HAVE USED: (Married, Maiden, etc.)

PHYSICAL ADDRESS:

STREET ADDRESS CITY STATE ZIP

MAILING ADDRESS (If different from above):

STREET ADDRESS CITY STATE ZIP

SOCIAL SECURITY NUMBER:

List any other Social Security Numbers you have used: _____ - _____

PHONE NUMBER: () OTHER: ()

EMAIL ADDRESS: _____

DRIVER'S LICENSE NUMBER AND STATE ISSUED: _____

List any other Driver's License number and State Issued: _____

1. HAVE YOU EVER HAD A GAMING LICENSE DENIED OR REVOKED?

- Yes No

If YES, please explain: _____

2. ARE YOU OVER 18 YEARS OF AGE?

Yes No

3. DO YOU HAVE THE LEGAL RIGHT TO WORK IN THE UNITED STATES?

Yes No

4. LANGUAGES SPOKEN OR WRITTEN *BESIDES* ENGLISH:

5. ARE YOU A MEMBER OF A STATE OR FEDERALLY RECOGNIZED TRIBE?

Yes No

Tribe: _____ Enrollment #: _____

6. HAVE YOU PREVIOUSLY BEEN EMPLOYED BY JACKSON RANCHERIA?

Yes No

If YES, when and what department: _____

7. DO YOU HAVE RELATIVES/FRIENDS WHO CURRENTLY WORK FOR JACKSON RANCHERIA?

Yes No

If YES, what are their name(s) and relationship(s): _____

REFERRAL SOURCE:

- Current Employee
- High School/College Recruit
- Job Fair
- Internet Website:
- Trade School Recruit
- Other:

EDUCATION:

	Name	Address (City & State)	Years Completed	Graduate
High School			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> Yes <input type="checkbox"/> No
College			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> Yes <input type="checkbox"/> No
Technical			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please list any special skills or training that would benefit you in your desired position:

MILITARY HISTORY:

Have you ever served in the United States Armed Forces?

Yes No

Is Yes: Branch _____ Type of Discharge _____ Dates of Service: _____

CRIMINAL HISTORY:

Note: *The existence of a criminal record does not constitute an automatic bar to employment. Individual circumstances will be considered.*

HAVE YOU EVER BEEN CONVICTED OF A **FELONY**?

Yes No

ARE THERE ANY PENDING OR ON-GOING **FELONY** PROSECUTIONS AGAINST YOU?

Yes No

Court Name & Address		Date of Conviction
Disposition (if any)		
Court Name & Address		Date of Conviction
Disposition (if any)		

HAVE YOU EVER BEEN CONVICTED OF A **MISDEMEANOR**?

Yes No

ARE THERE ANY PENDING OR ON-GOING **MISDEMEANOR** PROSECUTIONS AGAINST YOU?

Yes No

For each misdemeanor conviction or ongoing misdemeanor prosecution (excluding minor traffic violations) within the last ten (10) years of this application, please list:

Court Name & Address		Date of Conviction
Disposition (if any)		
Court Name & Address		Date of Conviction
Disposition (if any)		

EMPLOYMENT HISTORY:

Note: List all employers for the past **10** years (account for all periods of unemployment) starting with the most recent employer. **Resumes may be included with this application, but will NOT substitute for this section.**

1.	Start Date:	End Date:
	Employer:	Mailing Address:
	Starting Wage:	Ending Wage:
	Supervisor:	Telephone Number:
	Job Title and Duties:	

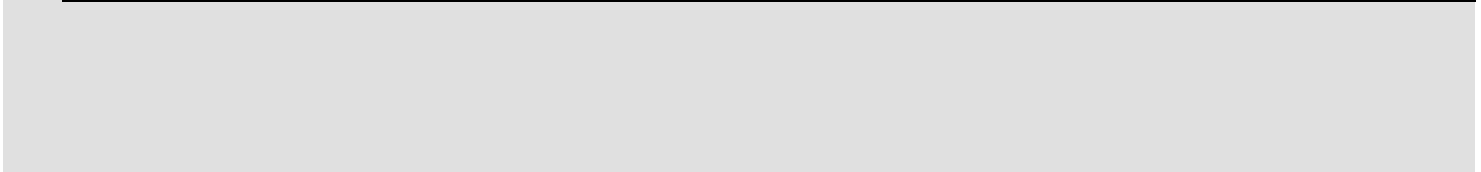
Reason for leaving:	

2.	Start Date:	End Date:
	Employer:	Mailing Address:
	Starting Wage:	Ending Wage:
	Supervisor:	Telephone Number:
	Job Title and Duties:	
	Reason for leaving:	

3.	Start Date:	End Date:
	Employer:	Mailing Address:
	Starting Wage:	Ending Wage:
	Supervisor:	Telephone Number:
	Job Title and Duties:	
	Reason for leaving:	

4.	Start Date:	End Date:
	Employer:	Mailing Address:
	Starting Wage:	Ending Wage:
	Supervisor:	Telephone Number:
	Job Title and Duties:	

Reason for leaving:	



5.	Start Date:	End Date:
	Employer:	Mailing Address:
	Starting Wage:	Ending Wage:
	Supervisor:	Telephone Number:
	Job Title and Duties:	
	Reason for leaving:	



Please explain any discharges or unfavorable separations of employment:



Employment Application

BACKGROUND CENSUS

The following information is requested on a voluntary basis and is confidential.

State law grants us permission to gather information on the backgrounds of persons applying for employment. This is in compliance with the Americans with Disabilities Act.

Please complete the following and submit it with your application. The form will be detached from your application. It will be kept separate and confidential.

We are gathering this information to evaluate the effectiveness of the devices we use to recruit applicants. It will be used strictly for statistical and analytical purposes, and we request this information on a voluntary basis.

The Jackson Rancheria Band of Miwuk Indians does not discriminate on the basis of race, color, national origin, sex, physical handicap, or sexual orientation in the activities it conducts.

I CONSIDER MYSELF TO BE A MEMBER OF THE FOLLOWING GROUP (check one):

HISPANIC:
All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture, regardless of race.

AFRICAN-AMERICAN:
All persons having origins in any of the Black groups of Africa.

CAUCASIAN:
All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

ASIAN OR PACIFIC ISLANDERS:
All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Sub-continent, or the Pacific Islands. This includes, for example, China, Japan, Korea, and Samoa.
Do you consider yourself to be Southeast Asian? Yes No

AMERICAN INDIAN or ALASKAN NATIVE:
All persons having origins in any of the original people of North America, and who maintain culture identification through tribal affiliation or community recognition.
Tribal Association: _____

FILIPINO:
All persons having origin in any of the Philippine Islands.

DISABLED:
As defined by the American with Disabilities Act Section 504.

Male Female

DATE OF BIRTH: _____

STATE OF RESIDENCE: _____ COUNTY OF RESIDENCE: _____