

EMPLOYMENT APPLICATION



OFFICE USE

Received: _____
 Preference: _____
 1st Interview: _____
 Position: _____
 2nd Interview: _____
 Expire Date: _____

4876 Haxton Way, Ferndale, WA 98248 (360)383-0777 Ext. 4185 Fax (360)384-6425

PLEASE PRINT		TODAYS DATE:		____ New Applicant		____ Former Employee	
Are you 21 years of age or older? YES NO				APPLICATIONS ARE KEPT ON FILE FOR 12 MONTHS			
LAST NAME			FIRST NAME			MIDDLE NAME	
PRESENT STREET ADDRESS:			CITY		STATE		ZIP CODE
MAILING ADDRESS IF DIFFERENT FROM ABOVE:			CITY		STATE		ZIP CODE
Home Phone ()		Work Phone ()		Message Phone ()		Email Address	
Are you seeking: ____ Full-Time ____ Part-Time ____ Temporary ____ On-Call Preferred Shift: ____ Day ____ Swing ____ Graveyard ____ Any							
Are you Employed Now? ____ Yes ____ No				When Can you Start:			
Have you ever applied here before: ____ No ____ Yes When:				Salary/Wage Desired:			
Position Applying For: 1st Choice:				2nd Choice:			
Do you have Gaming Work Experience? ____ Yes ____ No ____ Black Jack ____ Baccarat ____ Pai Gow Poker ____ Craps ____ Roulette Other Specify: _____				Do you have Casino Industry Management or Supervisory Experience? ____ Yes ____ No ____ Cage Supervisor/Manager ____ Shift/Casino Manager ____ Security Supervisor/Manager ____ Food & Beverage Sup/Manger ____ Floor Supervisor/Manager ____ Pit Manager ____ Keno Supervisor/Manager ____ Other Specify: _____			
PREFERENCE: Silver Reef Casino is an Equal Opportunity Employer but does exercise Indian Preference and Tribal Preference according to law.							
Are you an Enrolled Lummi Tribal Member: ____ Yes ____ No				Enrollment Number (Required):			
If Yes, are you a Lummi Fisher? ____ Yes ____ No							
Are you enrolled in another Federally Recognized Tribe: ____ Yes ____ No				Name of Tribe/Attach a copy of Enrollment Verification (Required)			
In case of Emergency, Please Notify: Name:		Relationship:		Address:		Phone #:	
Are you authorized to work in the U.S.A.? Yes No							
EDUCATION	NAME	CITY/STATE	# OF YEARS	GRADUATE?	DIPLOMA/DEGREE RECEIVED		
High School							
Trade/Business							
College							
Other (GED, Training)							
Describe any Specialized Training, Apprenticeships, Skills and other Training Activities: (Include Dates):							
Describe any Honors that you have received:							

*Please note that failure to fully and accurately complete this application may result in immediate disqualification of your application.

*Silver Reef Casino is also a Drug-Free Workplace and requires consent to testing by all associates

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Special Skills:	Are you experienced operator of any computers, machinery or equipment? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please Indicate Experience: <input type="checkbox"/> Copy Machine <input type="checkbox"/> Personal Computer <input type="checkbox"/> 10-Key by Touch <input type="checkbox"/> Fax Machine <input type="checkbox"/> Micros <input type="checkbox"/> Multi-Line Phone Other: Specify: _____		
List All Computer Software Programs and Indicate Your Degree of Proficiency:		
Software Program	Proficiency	Comments
	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	
	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	
	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	
	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	
State any additional information that you feel may be helpful to us in considering your application:		
Do You Currently Hold a Class III Certification through the State of Washington? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Name of Tribe and Casino: _____ Expiration Date: _____		
CRIMINAL HISTORY: Employment at the Silver Reef Casino will require the applicant to obtain a license from the Lummi Tribal Gaming Commission and may require certification from Washington State. To assist us in assessing any difficulties you may have with the licensing and certification process, answer the following question truthfully and accurately? Have you ever been convicted of a Felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes provide the date, list the felony and describe the circumstances below, if more space is needed please attach an additional sheet of paper. A conviction will not necessarily disqualify you from employment with the Silver Reef Casino.		
Date	Felony	Circumstances
Nepotism Policy You must disclose any persons who are employed by the Silver Reef Casino and who are related to you by blood, marriage or whom you share residence with. This includes brothers, sisters, parents, aunts, uncles, cousins, brother-in-law, sister-in-law, mother-in-law, father-in-law, aunt-in-law, uncle-in-law, cousin-in-law or any person whom you share a residence with. Please list any of the above named whom are employed by the Silver Reef Casino below. If more space is needed please attach an additional sheet of paper.		
Name of Employee	Relationship	Department
1		
2		
3		
4		
5		

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Employment Experience				
Start with your present or last job. You may attach another piece of paper or your resume; however, wage/salary history is required. Include any job-related military service assignments and volunteer activities. You may include organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.				
1. Employer Name:		Dates Employed:	Title/Work Performed	
Mailing Address:		From:		
		To:		
City: _____ State: _____ Zip: _____ Telephone Number: _____		Hourly/Salary Rate:		
		Start:		
		Final:		
Reason for Leaving:				
2. Employer Name:		Dates Employed:	Title/Work Performed	
Mailing Address:		From:		
		To:		
City: _____ State: _____ Zip: _____ Telephone Number: _____		Hourly/Salary Rate:		
		Start:		
		Final:		
Reason for Leaving:				
3. Employer Name:		Dates Employed:	Title/Work Performed	
Mailing Address:		From:		
		To:		
City: _____ State: _____ Zip: _____ Telephone Number: _____		Hourly/Salary Rate:		
		Start:		
		Final:		
Reason for Leaving:				
4. Employer Name:		Dates Employed:	Title/Work Performed	
Mailing Address:		From:		
		To:		
City: _____ State: _____ Zip: _____ Telephone Number: _____		Hourly/Salary Rate:		
		Start:		
		Final:		
Reason for Leaving:				
5. Employer Name:		Dates Employed:	Title/Work Performed	
Mailing Address:		From:		
		To:		
City: _____ State: _____ Zip: _____ Telephone Number: _____		Hourly/Salary Rate:		
		Start:		
		Final:		
Reason for Leaving:				
References (four Professional/Personal references requested; a minimum of two work references required, exclude relatives)				
Name	Type	Relationship	Address(Street, City, State, Zip)	Phone
	___ Work ___ Personal			
	___ Work ___ Personal			
	___ Work ___ Personal			
	___ Work ___ Personal			

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APPLICANT STATEMENT (REQUIRED)

I understand all of the following:

- That the Casino and/or Tribe may, and hereby authorize it to solicit information regarding my character, general reputation, conviction record, driving record, previous employment, and all former employers and references I have listed on my application. Additional information regarding the nature and scope of such inquiry, if one is made, will be provided if requested. I also authorize my former employers and references to disclose such information to the Tribe without providing me with prior notice of such disclosure. I release all parties and persons, including but not limited to the Tribe, the former employers and references I have listed on my application, and any persons or entities acting on their behalf, from all claims, liabilities and damages for any reason arising out to the furnishing of such information. If employed, I release the Tribe from any liability for future references it may provide regarding my work history with the Casino.
- I authorize all investigations of all statements contained herein. I further authorize the persons listed above as references to give you any and all information concerning my previous employment and any pertinent information they might have personal or otherwise, and release all parties from liability for any damage that may result in furnishing same to you.
- As a condition of my employment, I am required to undergo periodic drug/controlled substance testing and other job related testing with or without prior notice. I will be unable to work in any position which requires driving, using tools or machinery if I am under the influence of alcohol or drugs, including prescription drugs. I will be subjected to pre-employment testing, random testing, post accident testing, and reasonable suspicion testing as defined in the Silver Reef Casino, Drug and Alcohol Policy. If I test positive on a drug/controlled substance test, or an alcohol screening test, my employment may be terminated immediately. I acknowledge the consequences of a positive test. My signature below authorizes such testing as listed above and the release of test results to the Silver Reef Casino and Lummi Tribal Gaming Commission.
- If employed, I have been hired at the will of the employer, and that my employment may be terminated at will, at any time; and with or without cause, the employer's only obligation being to pay salary or wages due and owing at the time of the termination.
- Employment with the Silver Reef Casino will require the highest standards of personal hygiene and appearance as well as excellent work habits. Training and/or employment with the Silver Reef Casino will require conformity to rules related to appearance, work habits and other matters. As a condition of my employment, I may be required to work any shift, any hours, including weekends and holidays.
- I further consent to the release of information concerning my employment personal history, criminal history, which I have listed on this application to the Silver Reef Casino and the Lummi Tribal Gaming Commission.
- I am required to abide by all policies and rules of the employer and regulations of the Lummi Tribal Gaming Commission.
- I certify that the answers given by me to the foregoing questions and statements are true, correct, and complete made in good faith without intentional omission of any kind whatsoever. I agree that the Silver Reef Casino and/or the Lummi Indian Tribe shall not be liable in any respect if my employment is terminated because of false statements, answers, or omissions made by me in this application for Employment.

Applicant's Signature Affirming Above Statement (Required)

Date:

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