

DOUBLE EAGLE HOTEL & CASINO APPLICATION FOR EMPLOYMENT



An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Job Applying for _____ Today's Date _____

Last Name
First Name
Middle Name
Telephone Number

Present Street Address
City
State
Zip Code

Email address: _____

Are you Currently Employed? Yes or No / Full-Time or Part-time

If yes: Where _____ Position _____

May we contact your present employer for a reference? Yes or No Whom may we contact? _____

What type of position are you looking for at Double Eagle? Full-Time Part-time Shift: _____

When could you start work? _____

Have you ever been employed by Double Eagle? Yes No

If yes, when? _____ Position? _____

If your last name is different than when you were previously employed, what was it? _____

Do you have a valid Colorado Gaming license? Yes No Type: _____ #: _____ Exp. Date _____

Are you eligible to obtain a Colorado Gaming license? Yes No

Are you currently serving in the military or a Veteran? Yes No If yes, what branch? _____

For Driving Jobs Only: Do you have a valid driver's license? Yes No

Have you had your driver's license suspended or revoked in the last 3 years? Yes No

LIST NAME AND ADDRESS OF SCHOOLS	Dates Attended	Diploma/ Degree/ Certificate	Subjects Studied
High School or GED: _____			
College or University: _____			
Vocational or Technical: _____			
What skills or additional training do you have that relate to the job for which you are applying? _____			

What machines or equipment can you operate that relate to the job for which you are applying? _____			

Note: All applications are required to be reviewed by the General Manager and Human Resources before a position of employment is offered to any applicant. If an offer is made, we reserve the right to override that offer.

General Manager Signature/Date:

Comments: _____

Human Resources Director Signature/Date:

Comments: _____

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. **Note: A job offer may be contingent upon acceptable references from current and former employers.**

APPLICATIONS WITH INCOMPLETE WORK HISTORY WILL NOT BE CONSIDERED.

NAME OF EMPLOYER		JOB TITLE
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO
CITY, STATE, ZIP CODE		JOB DUTIES
SUPERVISOR(S)	TELEPHONE	Reason For Leaving
NAME OF EMPLOYER		JOB TITLE
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO
CITY, STATE, ZIP CODE		JOB DUTIES
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING
NAME OF EMPLOYER		JOB TITLE
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO
CITY, STATE, ZIP CODE		JOB DUTIES
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING

Have you worked or attended school under any other names? Yes No

If yes, give names: _____

Have you ever been fired from a job or asked to resign? Yes No

If yes, please explain: _____

Give three professional or personal references (please do not include relatives)

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

*I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. If hired, you will be required to furnish proof of your eligibility to work in the United States.

*I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

*I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

*I understand I may be extended an offer of employment conditioned upon my successfully passing a complete pre-employment physical examination at my expense. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE GENERAL MANAGER OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE GENERAL MANAGER AND THE EMPLOYEE. IF EMPLOYED. I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____

This application for employment will remain active for a limited time. Ask the organization's representative for details.

Please complete the following questions:

Why are you applying at the Double Eagle?

What experience do you have in the gaming industry?

Do you have any computer skills?

What positions are you interested in?

What hours and days are you available to work?

Where did you hear about our job openings?

Comments:
