



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 Applied for _____ Today's Date _____

Are you seeking: Full-time Part-time employment? When could you start work? _____

Last Name _____ First Name _____ Middle Name _____ Telephone Number _____

Present Street Address _____ City _____ State _____ Zip Code _____

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

If so, Where? _____ Position? _____

Many positions require a gaming license – Are you at least 21 years of age? Yes No

Email address: _____

Have you ever applied to the Double Eagle or Creeker's before? Yes No If yes, when? _____

Were you ever employed here? Yes No If yes, when? _____

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

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

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

If yes, give details: _____

| 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? _____ | | | |
| _____ | | | |

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. If self-employed, give firm name and supply business references. **Note: A job offer may be contingent upon acceptable references from current and former employers.**

| | | |
|-----------------------|-----------|--------------------------------------|
| 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 |
| 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: _____

Are you presently employed? Yes No

If yes, whom do you suggest we contact? _____

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

If yes, please explain: _____

Give three references, not relatives or former employers.

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 that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. 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 PRESIDENT 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 PRESIDENT 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 answer 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 hours are you willing to work?

Where did you hear about our job openings?

Comments:
