

Casino Fandango®

We are an Equal Employment Opportunity Employer

Name: _____

Name: _____ Date: _____
 Current Street Address: _____ Email Address: _____
 City: _____ State: _____ Zip Code: _____
 Home Phone: (____) _____ Cell Phone: (____) _____ Message Phone: (____) _____

Position applying for: _____ Available to start date: _____

Circle one:

Are you: Under 17 17 to 20 21 or older

Circle one or both:

Are you interested in: Full Time Part Time

How did you learn of this position (circle one): Walk-in: Referral: Newspaper: Website:

If you checked Referral, who referred you to us: _____

Circle what days and shifts you are available to work:

Day	Mon	Tue	Wed	Thur	Fri	Sat	Sun
Swing	Mon	Tue	Wed	Thur	Fri	Sat	Sun
Graveyard	Mon	Tue	Wed	Thur	Fri	Sat	Sun

Are you now working more than one job at a time?

(circle one) Yes No

If "yes", please explain: _____

EDUCATION:

School	Name of School	Graduated		Date Left	Major / Minor Courses Taken	Degree
		Yes	No			
High School						
College						
Graduate Work						
Trade or Business						
Correspondence						

Do you have friends or relatives currently employed by us?

Yes No If yes, circle one: Friend / Family

If yes, what is their name? _____ What department do they work in? _____

Have you been employed by this company before?

(circle one) Yes No

If yes, when and what was your job? _____

Have you ever been convicted of any crime under your own or another name, not including traffic tickets?

(A conviction does not necessarily disqualify you)

(circle one) Yes No

If "yes", state crime: _____ Date: _____ Charge: _____

Court (justice, muni, etc.): _____ Location: _____

Disposition of case: _____

Have you ever been discharged or asked to resign?

(circle one) Yes No

If "yes", please explain: _____

Do you have a means for getting to work regularly?

(circle one) Yes No

Date: _____

Starting with the present and going back 10 years list all jobs, self-employment or U.S. military service.
 (If you need an additional page to list your history, let us know.)

May we contact your present employer? (circle one) **Yes No**

From Mo / Yr	To Mo / Yr	Employer's Name and Address	Pay Rate	Position and Type of Work Performed	Specific Reason For Leaving
		Supervisor: Co. Phone #: ()			
		Supervisor: Co. Phone #: ()			
		Supervisor: Co. Phone #: ()			
		Supervisor: Co. Phone #: ()			
		Supervisor: Co. Phone #: ()			

Write the reason for any periods of unemployment between jobs: _____

APPLICANT’S CERTIFICATION AND AGREEMENT

PLEASE READ CAREFULLY

I hereby certify that the information set forth in this application is true and complete. I understand that any omission or misrepresentation of fact may result in refusal of or termination of employment. I hereby authorize the company to conduct an investigation of my background to include contacting previous employers.

I hereby authorize all personnel, schools, companies, corporations and law enforcement agencies to supply any and all information relating to my qualifications for the position applied for and I release the same from any liability resulting from providing such information.

I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without cause or prior notice, at the option of either myself or the company, and that no contrary promises or representations are binding on the company unless made in writing and signed by me and the General Manager of Casino Fandango or his designee. Similarly, I understand and agree that the company has the sole discretion to make employment decisions including, but not limited to, promotions, demotions, transfers, discipline and the assignment of work.

If hired, I understand the law requires me to provide proof of identity and eligibility to work in the United States.

ATTENTION APPLICANT: This application will be kept under active consideration for no more than 90 days from the date of the application as shown below.

Signature of Applicant

Date