

EMPLOYMENT APPLICATION

Employment preferences are provided to qualified Paskenta Band of Nomlaki Tribal Members. Rolling Hills Casino strives to be an equal opportunity employer dedicated to the policy of nondiscrimination based on race, sex, marital status, sexual orientation, religion, national origin, age, mental or physical disability, veteran status or any other non job-related factor. Any person requiring reasonable accommodation in the application process should contact Human Resources.

Employment applications are required for all positions. Applications will only be accepted for open positions and will remain "active" for 60 days. Please complete all information.

Please print legibly. A resume will not substitute for an application.



Rolling Hills Casino
Attn: Human Resources Dept.
2655 Everett Freeman Way
Corning, CA 96021-9336
Phone: (530) 528-3500
Fax: (530) 824-2081
www.rollinghillscasino.com

Name & Address

Name (Last, First, Middle Initial)

Street Address

City

State

Zip Code

Mailing Address (☐ check if same as street address)

City

State

Zip Code

() -
Home Phone #

() -
Cell Phone #

E-Mail Address

Emergency Contact Name:

() -
Phone #

Application

Position Applying For: _____

Requested Rate of Pay: \$ _____

Available Shift: ☐ Day ☐ Swing ☐ Graveyard ☐ Any

Type of work applying for: ☐ Full Time ☐ Part Time ☐ Temporary ☐ Any

Have you applied here before? ☐ Yes ☐ No

Have you been employed here before? ☐ Yes ☐ No Date: _____

Do you have a legal right to be employed in the United States? ☐ Yes ☐ No

If yes, you will be required to show proof upon hire

Are you at least 18 years old? ☐ Yes ☐ No

Are you at least 21 years old? ☐ Yes ☐ No

Are you a member of the Paskenta Band of Nomlaki Indians? ☐ Yes ☐ No

Do you have any relatives associated with or employed by Rolling Hills Casino or Sevillano Links? ☐ Yes ☐ No

Name

Relationship

Department

Are you related to, or have a close relationship with, or have association with any Surveillance employee? ☐ Yes ☐ No

Do you have a valid Driver's License? ☐ Yes ☐ No # State

Have you ever been convicted of a felony? ☐ Yes ☐ No
If yes, you will be required to provide date and reasons. This is required to obtain a gaming license. Type Year

HUMAN RESOURCES USE ONLY

Department

Interviewed

Date

/ /

/ /

/ /

Education

High School Diploma or GED: ☐ Yes ☐ No

Formal Education

Name of Institution	Location: City/State	Diploma/Degree obtained?	Major	Total Units Completed

Skills

List any special skills (computer, technical, mechanical, etc.). List professional certifications and/or licenses you currently hold (CPR, EMT, Culinary, CDL II, Etc.):

List language skills including Primary Language:

Language(s)	Read	Write	Speak

Previous Employment

Beginning with your current employment, list your work history, all businesses with which you have been involved, and/or all periods of unemployment for the past ten- (10) years. Do not leave any gaps in employment. You may fill in gaps with "Student", "Unemployed", "Homemaker", etc. If you do not want us to contact the employer place an X in the box.

1 ☐

Company Name			() -	
			Phone #	
Address		City	State	Zip Code
/ /	/ /	\$ per		
Employed From	Employed To	Last Wage	Immediate Supervisor	
Job Title		Reason for Leaving		
List of Duties				

2 ☐

Company Name			() -	
			Phone #	
Address		City	State	Zip Code
/ /	/ /	\$ per		
Employed From	Employed To	Last Wage	Immediate Supervisor	
Job Title		Reason for Leaving		
List of Duties				

3 ☐

				() -	
Company Name				Phone #	
Address		City		State	Zip Code
/ /	/ /	\$ per			
Employed From	Employed To	Last Wage	Immediate Supervisor		
Job Title			Reason for Leaving		
List of Duties					

4 ☐

				() -	
Company Name				Phone #	
Address		City		State	Zip Code
/ /	/ /	\$ per			
Employed From	Employed To	Last Wage	Immediate Supervisor		
Job Title			Reason for Leaving		
List of Duties					

5 ☐

				() -	
Company Name				Phone #	
Address		City		State	Zip Code
/ /	/ /	\$ per			
Employed From	Employed To	Last Wage	Immediate Supervisor		
Job Title			Reason for Leaving		
List of Duties					

6 ☐

				() -	
Company Name				Phone #	
Address		City		State	Zip Code
/ /	/ /	\$ per			
Employed From	Employed To	Last Wage	Immediate Supervisor		
Job Title			Reason for Leaving		
List of Duties					

7 ☐

				() -	
Company Name				Phone #	
Address		City		State	Zip Code
/ /	/ /	\$ per			
Employed From	Employed To	Last Wage	Immediate Supervisor		
Job Title			Reason for Leaving		
List of Duties					

8 ☐

Company Name

() -
Phone #

Address

City

State

Zip Code

/ /

/ /

\$ per

Employed From

Employed To

Last Wage

Immediate Supervisor

Job Title

Reason for Leaving

List of Duties

9 ☐

Company Name

() -
Phone #

Address

City

State

Zip Code

/ /

/ /

\$ per

Employed From

Employed To

Last Wage

Immediate Supervisor

Job Title

Reason for Leaving

List of Duties

10 ☐

Company Name

() -
Phone #

Address

City

State

Zip Code

/ /

/ /

\$ per

Employed From

Employed To

Last Wage

Immediate Supervisor

Job Title

Reason for Leaving

List of Duties

Referral Source

How were you referred to Rolling Hills Casino?

☐ Employee (First and Last Name):☐ Job Training Center:☐ Job/Employment Fair:☐ Social Services:☐ Newspaper Advertisement:☐ Walk In:☐ Internet Website:☐ Other:

Authorization

Please read and initial each line.

I understand the Immigration Reform and Control Act of November 6, 1986 requires me to prove the legality of my residency or citizenship. I am also aware that the failure to provide such proof at the time of request may legally force my termination. I understand that nothing contained in this employment application or in granting of an interview is intended to create a contract between myself and this company for either my employment or the provision of any benefits. I further understand that if an employment relationship subsequently is established, I will have the right to terminate my employment at any time and the company will have a similar right. In addition, I understand that no promise, representation or agreement contrary to the foregoing is binding on the company unless made in writing and signed by myself and an authorized representative of the company.

Initial

I understand that if I am considered for employment, the Tribal Gaming Commission, a separate regulatory agency of the Paskenta Band of Nomlaki Indians will investigate my background and employment history including a credit and criminal record check because I am applying for a position that requires a gaming license. I specifically consent to this investigation.

Initial

I certify that all answers to questions in this application and additional information I may have submitted are true and complete to the best of my knowledge. I understand that giving false information, misrepresenting facts, and material omissions may be grounds for denial of employment or discharge if hired. I hereby authorize investigation of all statements provided during the application process and all references given to Rolling Hills Casino and the Tribal Gaming Commission, any and all pertinent information they may have, personal or otherwise, and release from all liability or responsibility, Rolling Hills Casino, the Tribal Gaming Commission, any agent or either entity and all persons, companies or corporation providing information to Rolling Hills Casino or the Tribal Gaming Commission about me.

Initial

I understand that all final applicants receiving job offers for positions, including full-time, part-time, and temporary, will have job offers conditioned on satisfactorily passing a drug test. Individuals with positive drug testing results will not be hired and may not apply or be considered for employment for 12 months after positive drug results.

Initial

Applicant Signature

Date