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| Title of Positions Applying for: |
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Employment Application

Please use this APPLICATION to enter all requested information. An inaccurate or incomplete application may result in delayed processing or non-consideration for employment. The Isleta Resort & Casino (IRC) and the Pueblo of Isleta (POI) abide by Indian Preference in Employment Decisions by consideration of POI Members first and all other Native Americans from a federally recognized Tribe second. IRC is an Equal Opportunity Employer (E/O/E).

| | | |
|---|-------------------------|--|
| APPLICANT CONTACT INFORMATION | | |
| Name (Last, First, MI) | Day Phone Number | Cell Phone |
| Mailing Address (Number, Street, city, state, zip and apt./condo unit) | | Email Address |
| BACKGROUND | | |
| <p>Are you a current or former resident of New Mexico? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you a current or former employee of the Isleta Resort & Casino (or the former Hard Rock)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you have a legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you at least eighteen (18) years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are you at least twenty-one (21) years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you been convicted of any felonies in the past ten (10) years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If "Yes", Please Explain _____</p> <p>Do you have <u>any</u> current litigation (court case) pending or in process at <u>any stage</u>? <input type="checkbox"/> Yes <input type="checkbox"/> No (This includes felony, misdemeanor, or civil cases)</p> <p>If "Yes", Please Explain _____</p> <p><i>Answering "YES" to the above two questions will not automatically exclude you from employment opportunities but may limit the position for which you may qualify.</i></p> <p>Note: You may be subjected to a background check, including a pre-employment drug test because of the nature of the work performed and the Casino's security requirements</p> | | |
| NEPOTISM/FAVORTISM | | |
| <p>IRC prohibits nepotism and favoritism and limits the hiring and Reporting of relatives or household members from working in any Capacity that may create or appear to create a conflict of Interest. Answering "YES" to the following question will not Automatically exclude you from employment opportunities.</p> | | <p>Are you related to or residing with any IRC or Regulatory Employee? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Name(s) of Employees: _____</p> |
| DRIVERS LICENSE | | |
| <p>Do you currently possess a valid Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No State Issued ID Card? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>State of Issue: _____ Number: _____</p> | | |
| MILITARY SERVICE | | |
| <p>Are you a Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Special Training: _____</p> | | |
| TRIBAL AFFILIATION & ENROLLMENT / ELIGIBILITY INFORMATION | | |
| <p>I am claiming Native American Preference in Employment: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Tribal Affiliation and Enrollment Number: _____ # _____</p> <p>Note: In order to recognize Native Preference, you must provide a copy of your Tribe's Enrollment card or Certificate of Blood Quantum from a Federally Recognized Tribe in accordance with the Indian Preference Act of 1934 (25 U.S.C. 472)(PL9368) Tribal Preference.</p> | | |
| WORK SCHEDULE AVAILABILITY | | |
| <p><input type="checkbox"/> Full Time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal What Shifts are you willing to work: <input type="checkbox"/> Day <input type="checkbox"/> Swing <input type="checkbox"/> Evening <input type="checkbox"/> Weekend</p> | | |



Employment Application

EDUCATION: (Must provide documentation)

Have you graduated from High School or obtained your GED? Yes No
 Have you attended an accredited college or university? Yes (Complete Section Below) No

| SCHOOL NAME | CITY / STATE | MAJOR/STUDIES | NUMBER OF CREDITS | DATES ATTENDED | |
|-------------|--------------|---------------|-------------------|----------------|----|
| | | | | From | To |
| | | | | | |
| | | | | | |
| | | | | | |

LICENSE, REGISTRATION, CERTIFICATIONS OR CERTIFICATES: (Must provide documentation)

| Name/Issuing Institution | Number | Expiration Date |
|--------------------------|--------|-----------------|
| | | |
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REFERENCES

IRC contacts the references of all position finalists and in some instances will speak with references to determine interviewees. None of the people you list here will be contacted without your permission. References should be able to attest to your character, work ethic, personality, professional skills and accomplishments. Immediate family or blood relatives should not be used as references. Before you list someone as a reference, please make sure you have contacted them.

Do we have your permission to contact your references as presented below: Yes No

Permission to Contact?

| Reference Name | Company/Organization | Phone Number (Cell, Home or Office) | Email | Relationship (i.e., Manager, employee, colleague) | Permission Granted to Contact |
|----------------|----------------------|-------------------------------------|-------|---|--|
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

RESIDENCE:

Have you lived at your current address for less than seven (7) years? Yes No
 If yes, please list all additional addresses where you have lived in the past seven (7) years.

| Address | City/State | Dates of Residence |
|---------|------------|--------------------|
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EMPLOYMENT HISTORY



Employment Application

Starting with your **PRESENT or MOST RECENT EMPLOYER** list in consecutive order **ALL EMPLOYMENT** for at least the past **TEN years**. If a student or not employed during this time frame, check here: Student (Unemployed) Unemployed

If currently employed, may we contact your employer? Yes No

| Name of Company | Phone (Area Code & Number) | Salary Begin / End | Employed From / To |
|---|----------------------------|--|-----------------------|
| Street Address | | City | State |
| | | Zip | Last Position Held: |
| Supervisor's Name | | Title | |
| | | Reason for Leaving | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | |
| Name of Company | Phone (Area Code & Number) | Salary Begin / End | Employed From / To |
| May we contact your former employer? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Street Address | | City | State |
| | | Zip | Last Position Held: |
| Supervisor's Name | | Title | |
| | | Reason for Leaving | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | |
| Name of Company | Phone (Area Code & Number) | Salary Begin / End | Employed From / To |
| May we contact your former employer? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Street Address | | City | State |
| | | Zip | Last Position Held: |
| Supervisor's Name | | Title | |
| | | Reason for Leaving | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | |
| Name of Company | Phone (Area Code & Number) | Salary Begin / End | Employed From / To |



Employment Application

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|---|---------------------------------------|-------|---------------------------|---------------------|---------------------------|
| May we contact your former employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Street Address | City | State | Zip | Last Position Held: | |
| Supervisor's Name | | Title | | Reason for Leaving | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | | | |
| Name of Company | Phone (Area Code & Number) | | Salary Begin / End | | Employed From / To |
| May we contact your former employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Street Address | City | State | Zip | Last Position Held: | |
| Supervisor's Name | | Title | | Reason for Leaving | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | | | |
| Name of Company | Phone (Area Code & Number) | | Salary Begin / End | | Employed From / To |
| May we contact your former employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Street Address | City | State | Zip | Last Position Held: | |
| Supervisor's Name | | Title | | Reason for Leaving | |
| LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY: | | | | | |
| Please use additional pages to properly capture your Employment History | | | | | |



Employment Application

ADDITIONAL WORK HISTORY PAGES



Employment Application

DISCLOSURE

I understand that the application for employment does not imply a contract for employment between the Isleta Resort & Casino (IRC) and me. I hereby understand and acknowledge that, any employment relationship with this organization is of an “at will” nature, which means that the Employee may resign at any time and the Pueblo of Isleta may discharge said employee with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by statements that alter the “at will” nature of employment.

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize any investigator, or other duly accredited representative of the company and/or agency conducting my background investigation, to obtain any information relating to my activities from individuals, schools, residential management agents, employers, criminal justice agencies, or other sources of information. This information may include, but is not limited to, my academic, residential, achievement, performance, attendance, disciplinary, employment history, and criminal history record information. I further authorize any investigator, or other duly accredited representative of the Pueblo of Isleta (“POI”) and Personnel Security Consultants, Inc., who is conducting my background investigation, to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for assignment to, or retention in a position working with children. I understand that I may request a copy of such records as may be available to me under the law. I authorize custodians of records and other sources of information pertaining to me to release such information upon request of the investigator, or other duly accredited representative authorized above regardless of any previous agreement to the contrary.

I understand that the information released by records custodians and sources of information is for official POI and Personnel Security Consultants, Inc. only for the purposes of determining my suitability for employment with the POI. I forever release, fully discharge, and agree to indemnify, defend and hold harmless the POI and Personnel Security Consultants Inc. and their respective officers, employees, Board members, volunteers, representatives and agents from any and all claims, causes of action, responsibility, liability, damages, losses, costs and expenses of any nature related directly or indirectly to performing such investigations and criminal history checks and using and relying on any information obtained there from. Additionally, I forever release, fully discharge, and agree to indemnify, defend and hold harmless any current or former employer or educational institution, and any officer, employee, volunteer, representative or agent thereof, that furnishes written or verbal information about me from any and all claims, causes of action, responsibility, liability, damages, losses, costs and expenses of any nature related directly or indirectly to furnishing such information. Copies of this authorization that show my signature are as valid as the original release signed by me. This authorization is valid for five (5) years from the date signed or upon the termination of my affiliation with the POI whichever is sooner.

LICENSING REQUIREMENTS

I understand that prior to a formal offer of employment, I may be required to fill out a separate application through the Pueblo of Isleta Gaming Regulatory Agency (POIGRA) and/or the IRC to undergo a background check to include criminal records from the county, state, federal and tribal courts to include Felony and Misdemeanor convictions, Social Security Number Verification, Motor Vehicle Report History, Fingerprints and may include Credit History depending on position.

CERTIFICATION

I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

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|------------------|-------------|
| Signature: _____ | Date: _____ |
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