

APPLICATION FOR EMPLOYMENT

2235 Creswell Ln
Opelousas, LA 70570



Please Print

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for: _____ Date of application: ____ / ____ / ____

Referral Source: Advertisement Employee Relative Government Employment Agency
 Walk-in Private Employment Agency Other

Name Source (if applicable): _____

Name _____
 Last First Middle Other Names Worked Under

Address _____ Social Security # _____
 Street City State Zip Code

Telephone # (____) _____ Mobile/Beeper/Other Phone # (____) _____

If necessary, best time to call you at home is: _____ a.m. p.m. May we contact you at work? Yes No

If yes, work number: (____) _____ Best time to call is: _____ a.m. p.m.

Have you ever been employed here before? Yes No If yes, give dates: From ____ / ____ / ____ to ____ / ____ / ____

Are you legally eligible for employment in this country? Yes No Are you at least 18 years of age or older? Yes No

The Diamond Jo Casino takes every precaution to avoid conflict of interest in its employment practices, including favoritism in hiring and employment of relatives who may be in a supervisory/subordinate relationship.

Do you have any relatives employed here? Yes No If yes, please specify: _____

Type of employment desired: Full Time Part-time Temporary Seasonal Educational Co-Op

Date available for work: ____ / ____ / ____ Desired salary range: \$ _____

Have you ever been charged, convicted, or pled guilty or no contest to any criminal offense—felony or misdemeanor? Yes No

If yes, please provide date and details: _____

Answering "Yes" to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be taken into account.

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in the comments section below.

WORK EXPERIENCE				
EMPLOYER	TELEPHONE #	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
STARTING JOB TITLE/FINAL JOB TITLE		HOURLY RATES/SALARY		
IMMEDIATE SUPERVISOR AND TITLE		STARTING \$	FINAL \$	
REASON FOR LEAVING				
IF PRESENTLY EMPLOYED, MAY WE CONTACT YOUR REFERENCES? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later				

EMPLOYER	TELEPHONE #	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
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IMMEDIATE SUPERVISOR AND TITLE		STARTING	FINAL	
		\$	\$	
REASON FOR LEAVING				
IF PRESENTLY EMPLOYED, MAY WE CONTACT YOUR REFERENCES? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later				

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		\$	\$	
REASON FOR LEAVING				
IF PRESENTLY EMPLOYED, MAY WE CONTACT YOUR REFERENCES? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later				

COMMENTS INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT:

QUALIFICATIONS
Summarize any special training, skills, licenses and/or certificates, special accomplishments, publications, and awards etc. related to the position for which you are applying.

EDUCATION

HIGH SCHOOL	NUMBER OF YEARS COMPLETED	GRADUATE <input type="checkbox"/> Yes <input type="checkbox"/> No	GED <input type="checkbox"/> Yes <input type="checkbox"/> No

COLLEGE (or other further education)	NUMBER OF YEARS COMPLETED	DEGREE/ DIPLOMA	GPA/ RANK	MAJOR	MINOR

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete, and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering, and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract or employment for any specified period or definite duration. I understand that no supervisor or representative or the employer is authorized to make any assurances to the contrary and that no implied oral or written agreement contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

_____ Signature of Applicant

_____ Date