





Application for Employment

It is our policy to comply with all applicable State and Federal Laws prohibiting discrimination in employment based on race, age, color, sex, religion, origin, or other protected classification: Native American Preference Applies.

| Please check each location of interest | | | | | | | | | | | | |
|---|----------|----------|------------|----------|--------|----------|---------|---------|---------|---------|---------|-----|
| | <u>N</u> | Jewki: | r <u>k</u> | | | Red | Rock | | | | Perry | |
| | First (| Counc | il Cas | ino | | Paradise | e Casin | 10 | | Perr | y Casi | no |
| | Chilo | cco G | asino | | | Red Roo | ck Gasi | ino | | | - | |
| Last Name: | | | | First Na | ame: | | | M | iddle N | ame: | | |
| Maiden/Other Names Used: | | | | | | | | S.S. | #: | | | |
| Current Address: (Street, P.O. Box) | | | .\ | | (City) | | /C1= | 4.2 | | (Zin Co | 1-\ | |
| | | (Street, | Р.О. Вох | () | | (City) | | (Sta | te) | | (Zip Co | ae) |
| Home Phone #: Cel | | | Cell | Phone #: | | | Mes | sage Pl | none #: | | | |
| Email Address: | | | | | | | | | | | | |
| Are you at least 18 years of age: Yes No Are you at least 21 years of age: (Beverage Services Requirement) Yes No | | | | | | | | | | | | |
| Are you a member of a Federally Recognized Native American Tribe? Yes If yes, please state your affiliation*: | | | | | | | | | | | | |
| (*Must provide a copy of your CDIB card to qualify for Native Preference or provide a tribal citizenship/enrollment card or documentation.) | | | | | | | | | | | | |
| Please check all positions applying for and or interested in: (Not all positions are available at all locations) □ Food Services □ Beverage Services (Bar) □ Housekeeping □ Maintenance □ Soft Count | | | | | | | | | | | | |
| □ Slot Attendant □ Players Club Representative □ Table Games Blackjack/Poker □ CashOps | | | | | | | | | | | | |
| □ Valet** □ Security** □ Other (Please List): | | | | | | | | | | | | |
| **Valet and Security positions require VALID Driver's License | | | | | | | | | | | | |
| 7 CLANS CASINOS is a 24/7 guest service business and requires most positions to work weekends and holidays. | | | | | | | | | | | | |
| Which days and shifts are you available: □ ANY □ Monday □ Tuesday □ Wednesday □ Thursday □ Friday □ Saturday □ Sunday | | | | | | | | | | | | |
| □ ANY | | , | | J | | 3 | , | | • | | , | • |
| □ ANY □ Days (Most day positions are in-house only) □ Swing (2nd) □ Graveyard (3rd) □ Split Shifts | | | | | | | | | | | | |
| Date you will be available to begin employment: | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Have you ever held a Gaming License or Permit? ☐ Yes ☐ No | | | | | | | | | | | | |
| If so, When: Where: | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| PLEASE BE AWARE: All positions require a gaming license and/or permit. Once management selects an applicant, they are then processed by Human Resources and the Otoe-Missouria Gaming Commission. This process may take several days and can take up to several weeks depending on an individual's background and other determining factors. | | | | | | | | | | | | |







| Previous OMDA Employment | | | | | | | | | |
|---|--|--------|-----------|------|--|--|--|--|--|
| Have you ever worked for any division of the Otoe-Missouria Development Authority (OMDA), such as First Council Casino, Paradise Casino, Chilocco Gasino, Red Rock Gasino, First Council Hotel, Otoe-Missouria Travel Marts, and/or any other business entity of the Otoe-Missouria Tribe? | | | | | | | | | |
| If so, which Property: | Department: Da | | | | | | | | |
| Property: | Department: | Dates: | | | | | | | |
| Re-hire eligibility is based on circumstances regarding prior separation and the individual's employment records. | | | | | | | | | |
| Relations Employment- Nepotism Policy Do you have any relatives employed by any of the casinos where you are applying? \square Yes \square No | | | | | | | | | |
| If so, Who: Where: | | _ | onship: _ | | | | | | |
| Who: Where: | | _ | onship: _ | | | | | | |
| Who: Where: | Department: | Keiau | onship: | | | | | | |
| Basic Background During the last 7 years, were you fired from after being told that you would be fired, or because of a specific problem? | | · [| l Yes | □No | | | | | |
| Have you ever been convicted of, or forfeit if the charges were dropped or reduced? | collateral for any felony violation? Eve | en 🗆 | l Yes | □No | | | | | |
| Have you ever been convicted of, or forfeit violations? Even if charges were dropped of | • | | l Yes | □ No | | | | | |
| During the last 10 years have you forfeited imprisoned, been on probation, been on pa | | | l Yes | □ No | | | | | |
| If you answered "YES" to the 4 questions above, explain for each job/conviction the problem(s) and your reason(s) for leaving/imprisonment. Please include specifics such as: Employers name and address, full explanation of any violations, place of occurrences, and name/address of police or court involved, dates are required : | | | | | | | | | |
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| EDUCATION | | | | | | | |
|--------------------------|-------------------------|-------------|--------------------------|--------------|--------------|--|--|
| Name & | & Location of School | Major | Diploma/Degree | Did y | ou graduate? | | |
| High School: | | | | □ Y | es □No | | |
| College/University: | □ Y | es 🗆 No | | | | | |
| College/University: | <u> </u> | es □No | | | | | |
| Other Training/Educa | tion: | | | □ Y | es 🗆 No | | |
| Please list any other sk | ills, training or exper | rience that | you would like us to kno | ow about: | • | | |
| | | | | | | | |
| WORK HISTORY (Ple | ease list for the PAS | T 5 YEARS | and account for ANY G | APS in emplo | yment) | | |
| • | | | | | | | |
| Most Recent/Current I | Employer Business N | Jame | Location/Address | | Phone# | | |
| | | | | | | | |
| Date Started | Date Left | Position I | Jpon Leaving | Rate | of Pay | | |
| Reason for Leaving: | | | | | | | |
| Description of Duties: | | | | | | | |
| | | | | | | | |
| Previous Employer Bu | siness Name | | Location/Address | | Phone# | | |
| | | | | | | | |
| | | | | | ate of Pay | | |
| Reason for Leaving: | | | | | | | |
| Description of Duties: | | | | | | | |







| Previous Employer Bu | Location/Addres | ocation/Address | | | | | | |
|---|--------------------------------|-----------------|------------------------|--------------------|-----------|------------------|--|--|
| Trevious Employer Bu | oniess i taine | | Location, radice | | | Phone# | | |
| | | | | | | | | |
| Date Started | Date Left | Position U | Jpon Leaving | | Rate | of Pay | | |
| Reason for Leaving: | | | | | | | | |
| Description of Duties: | | | | | | | | |
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| Previous Employer Bu | cinoss Namo | | Location/Addres | 0 | | Phone# | | |
| r revious Employer bu | sitiess ivaille | | Location/ Addres | 5 | | rnone# | | |
| | | | | | | | | |
| Date Started | e Started Date Left Position U | | | | of Pay | | | |
| Reason for Leaving: | | | | | | J | | |
| O . | | | | | | | | |
| Description of Duties: | Description of Duties: | | | | | | | |
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| Please attach additional paper if needed for work history continuation and to cover gaps in last 5 years. | | | | | | | | |
| You must fully comple | ete and sign this appli | cation in or | der to be considered | l for any positio | n. Ple | ase feel free to | | |
| | esume and any copies | | | | | | | |
| Before signing please READ and INITIAL the following notices: | | | | | | | | |
| Any false statement made on this application may be grounds for non-hire, or if hired, subsequent termination. | | | | | | | | |
| I understand that any information I give may be investigated as allowed by law. | | | | | | | | |
| | ocument, you are givin | | | | | | | |
| authorization to conduct a background investigation and to inquire on credit, criminal, public and employment | | | | | | | | |
| records. Learning that to the best of my knowledge and belief all statements are true correct, complete, and made in | | | | | | | | |
| I certify that, to the best of my knowledge and belief, all statements are true, correct, complete, and made in good faith. | | | | | | | | |
| 0 | | | | | | | | |
| | | | | | | | | |
| Applicants Signature | | | | | | Date | | |
| If scheduled for a p | rescreening and/or interv | iew, please | make sure to dress app | propriately in bus | siness ca | asual attire. | | |
| | | | sources Only | | | | | |
| Date Received: | Prescre | eened: | | By: | | | | |