



Position(s) Applying For:

Date Available:

Employment Application

Thank you for considering the many careers at Spotlight 29 Casino for your future!

Applications will only be considered if...

- ...all fields on all pages of the application are filled out completely and accurately.
- ...gaps in employment history that span more than two months are explained.
- ...reasons for leaving prior employment are filled out.

<p>Name: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>State: _____ Zip: _____</p> <p>What other names have you used in prior employment or school? _____</p> <p>_____</p> <p>_____</p>	<p>Salary Desired: _____</p> <p>Primary Phone # : _____</p> <p>Secondary Phone # : _____</p> <p>Tribal Affiliation (if any): _____</p> <p>If you are under the age of 21, please indicate your age: _____</p>
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Completed applications can be...

Emailed: as an attachment to smarshall@spotlight29.net

Faxed: (760) 775-7677

Mailed: Human Resources Department
Spotlight 29 Casino
46200 Harrison Place
Coachella, CA 92236

In Person: Spotlight 29 Casino is located on Dillon Road between I-10 and US-86. The Human Resources office, which is located in the casino at the top of the escalator next to the Blue Bar, is open 8am-5pm, Monday through Friday. You may also leave your completed application at the Public Safety booth located next to the Cash Cage.

If offered employment, can you submit verification of your legal right to work in the United States?

_____ Yes _____ No

Desired Employment Status

_____ Full-Time - Available for all shifts including weekends, holidays, & overtime.	_____ Part-Time	_____ Grave	_____ Day
		_____ Swing	

Can you perform the essential functions of the position for which you are applying? _____ Yes

_____ No

If no, please specify any reasonable accommodation that may allow you to perform the essential functions of the job.

Qualifications: Skills, Experience, etc.

Do you have a current Gaming License? _____ Yes _____ No If yes, specify Gaming Number _____ Expires: _____	Have you ever applied at Spotlight 29 Casino? _____ Yes _____ No If so when? _____ What position? _____ Under what name? _____	Do you have a current State Dept. of Health Card? (Food Workers Certificate) _____ Yes _____ No Expires: _____
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Have you been convicted of a crime other than minor traffic violations or are you awaiting trial for a crime?

_____ Yes _____ No

If yes, please give dates, locations, nature and disposition of the convictions:

(Answering "yes" will not necessarily disqualify an applicant for employment)

Do you have relatives employed by Spotlight 29 Casino? _____ Yes _____ No

If yes, please give name(s), and relationship: _____

(Relatives include mother, father, aunts, uncles, nephews, nieces, grandparents, brother, sister, the equivalent in-laws, step relatives, or special equivalent and their dependents employed by Spotlight 29 Casino.)

Education

	High School	College / University	Graduate
School Name:			
School City&State:			
Did you Graduate?			
If not, Highest Year:			

Please list any additional education completed:

Language Capabilities

Language(s)	Read	Write	Speak
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Applicant Questionnaire



Please Print: Last Name: _____ First Name: _____ MI: _____

Desired Position: _____

Please check the box that best describes you and the employment you are seeking.

Desired Employment	<input type="checkbox"/> Full-Time (Over 30 hrs)	<input type="checkbox"/> Part-Time (Less than 30 hrs)			
Shift Availability	<input type="checkbox"/> Available all Shifts	<input type="checkbox"/> Day Shift Only	<input type="checkbox"/> Swing Shift Only	<input type="checkbox"/> Grave Yard Only	
Daily Availability	<input type="checkbox"/> Monday-Friday Only	<input type="checkbox"/> Weekends Only Sat. & Sun.	<input type="checkbox"/> Extended Weekend Fri., Sat., & Sun.	<input type="checkbox"/> Available Any Day of the Week	
Highest Completed Schooling	<input type="checkbox"/> Do NOT Possess Diploma or GED	<input type="checkbox"/> High School Diploma / GED	<input type="checkbox"/> Associates Degree	<input type="checkbox"/> Bachelors Degree	<input type="checkbox"/> Masters / Doctorate

Major Field of Study: _____

Experience in Desired Position	<input type="checkbox"/> None	<input type="checkbox"/> 1 to 2 Years	<input type="checkbox"/> 2 to 3 Years	<input type="checkbox"/> 3 to 5 Years	<input type="checkbox"/> Greater than 5 Years
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Where: _____

Training / Schooling in Desired Position	<input type="checkbox"/> None	<input type="checkbox"/> On-the-Job Training	<input type="checkbox"/> Certificate Program	<input type="checkbox"/> Academic Schooling
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Where: _____

Current Computer Skills	<input type="checkbox"/> None	<input type="checkbox"/> Basic Computer Skills	<input type="checkbox"/> Proficient in MS Office	<input type="checkbox"/> Experienced on Many Different Applications	<input type="checkbox"/> Ability to Program Troubleshoot
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Where: _____

Supervisory Experience	<input type="checkbox"/> None	<input type="checkbox"/> 1 to 2 Years	<input type="checkbox"/> 2 to 3 Years	<input type="checkbox"/> 3 to 5 Years	<input type="checkbox"/> Greater than 5 Years
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Where: _____

Please continue on the next page.

Work History

Beginning with your most **recent** experience, list below all present and past employment for the last Ten (10) Years. Include summer or part-time employment, any unemployment period, or self-employed periods. Show dates and locations.

Employer #1

Name _____	From	Job Title _____		Resigned	
Address _____		Phone # _____		Terminated	
City _____	To	Starting Wage \$ _____		Laid off	
State, Zip _____		Ending Wage \$ _____			

Ending Job Duties: _____

Employer #2

Name _____	From	Job Title _____		Resigned	
Address _____		Phone # _____		Terminated	
City _____	To	Starting Wage \$ _____		Laid off	
State, Zip _____		Ending Wage \$ _____			

Ending Job Duties: _____

Employer #3

Name _____	From	Job Title _____		Resigned	
Address _____		Phone # _____		Terminated	
City _____	To	Starting Wage \$ _____		Laid off	
State, Zip _____		Ending Wage \$ _____			

Ending Job Duties: _____

Employer #4

Name _____	From	Job Title _____		Resigned	
Address _____		Phone # _____		Terminated	
City _____	To	Starting Wage \$ _____		Laid off	
State, Zip _____		Ending Wage \$ _____			

Ending Job Duties: _____

Employer #5

Name _____	From	Job Title _____		Resigned	
Address _____		Phone # _____		Terminated	
City _____	To	Starting Wage \$ _____		Laid off	
State, Zip _____		Ending Wage \$ _____			

Ending Job Duties: _____

Please continue with additional Work History on the next page.

Any misrepresentation or omission of facts in this application or in any attachments may result in refusal of employment, or, if employed, termination from employment. No expressed or implied covenants exist that in any way conflict with "employment at will" relationship. Any relationship between an employee and Spotlight 29 Casino is for an unspecified term and considered employment at will.

Additional Work History

Employer #6

Name _____	From	Job Title _____		Resigned	
Address _____		Phone # _____		Terminated	
City _____	To	Starting Wage \$ _____		Laid off	
State, Zip _____		Ending Wage \$ _____			

Ending Job Duties: _____

Employer #7

Name _____	From	Job Title _____		Resigned	
Address _____		Phone # _____		Terminated	
City _____	To	Starting Wage \$ _____		Laid off	
State, Zip _____		Ending Wage \$ _____			

Ending Job Duties: _____

Employer #8

Name _____	From	Job Title _____		Resigned	
Address _____		Phone # _____		Terminated	
City _____	To	Starting Wage \$ _____		Laid off	
State, Zip _____		Ending Wage \$ _____			

Ending Job Duties: _____

Employer #9

Name _____	From	Job Title _____		Resigned	
Address _____		Phone # _____		Terminated	
City _____	To	Starting Wage \$ _____		Laid off	
State, Zip _____		Ending Wage \$ _____			

Ending Job Duties: _____

References

Give three (3) references (not related or former employers) whom you have known for at least five (5) years.

Name	Address, City, State, Zip	Phone #

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Applicant Acknowledgement

I acknowledge and understand that Spotlight 29 Casino is a 24 hours per day, 7 days per week, 365 days per year operation. All employees are required to be available to work any and all shifts, as they may be assigned, based upon the needs of Spotlight 29 Casino. I understand and acknowledge that Spotlight 29 Casino is a gaming facility and is not a smoke free environment.

Any misrepresentation or omission of facts on this application or in any attachments may result in refusal of employment or, if employed, termination from employment. No expressed or implied covenants exist that in any way conflict with the "employment at will" relationship. Any relationship between an employee and Spotlight 29 Casino is for an unspecified term and considered employment at will.

Spotlight 29 Casino is governed by the provisions of federal law, not state law except where specifically stated under Tribal ordinance or required by state compact.

The typing of my name on the line below or a valid digital signature will be interpreted as a legal signature. If an offer of employment is made, I may be asked to physically sign the application at that time.

Applicant's Signature: _____

Date: _____

*Thank you for your interest in joining the Spotlight 29 Team.
Your application will be reviewed and, if you meet the requirements for an available position,
you will be contacted for an interview.*