



**RED FOX CASINO  
APPLICATION**

Thank you for applying for employment with Red Fox Casino.

In order to be considered for employment at Red Fox Casino, you must complete and return the following:

- Red Fox Casino Application for Employment.

**ALL INFORMATION MUST BE COMPLETE AND ACCURATE**

In accordance with Federal law, all applicants for employment at the Red Fox Casino are hereby notified that they must agree to the **DRUG TEST POLICY** of Laytonville-Cahto Rancheria and to pass a certified test conducted on the premises, prior to employment at the Casino. Applicants failing to take the test or who receive positive results will not be considered for employment.

Should you be employed by the Red Fox Casino for the position for which you have submitted an application, your employment will be temporary and contingent upon a successful background investigation per the rules established by the Cahto Tribal Gaming Commission and the National Indian Gaming Commission.

A background investigation is required on each applicant who wishes to work for the Red Fox Casino. The purpose of investigation is to determine eligibility for obtaining a gaming license, which is required for employment with the Red Fox Casino. There is a fee of \$150.00 for a Class A or a Class B gaming license. This fee will be deducted from your paycheck should you be hired.

**Class A positions include:**

Slot Attendant, Cage Cashier, Drop/Count Team, Vault, Security, Promotions and Key Administrative positions.

**Class B positions include:**

Café, Housekeeping and Yard/Maintenance positions.

**The following factors will determine if you are eligible for employment:**

**Felony Convictions**

- Persons convicted of any felony are not eligible for a Class A gaming license.
- No felony convictions for any theft-related crimes, crimes of violence, sex crimes, or perjury crimes within the past ten years will be eligible for employment.
- Felony convictions over 10 years old, and for crimes not identified above, may be considered on a case-by-case basis for a Class B gaming license.

**Misdemeanor Convictions**

- Misdemeanor convictions for theft or other crimes of moral turpitude will not be eligible for employment. Convictions for other misdemeanor crimes may be considered for employment on a case-by-case basis.



# Application For Employment

In compliance with the Privacy Act of 1974, the following information is provided:

**25 CFR Section 537.I(b)(4) PRIVACY NOTICE**

Solicitation of the information in this section is authorized by 25 U.S.C. 2701, et seq. The purpose of the requested information is to determine the suitability of individuals with a financial interest in, or having management responsibility for, a management contract. The information will be used by the National Indian Gaming Commission members and staff and Indian tribal officials who have need for the information in the performance of their official duties. The information may be disclosed to appropriate federal, tribal, state or foreign law enforcement and regulatory agencies in connection with a background investigation or when relevant to civil, criminal or regulatory investigations or prosecutions or investigations of activities while associated with a gaming operation. Failure to consent to the disclosures indicated in this statement will mean that the Chairman of the National Indian Gaming Commission will be unable to approve the contract in which the person has a financial interest or management responsibility. The disclosure of a person's Social Security Number (SSN) is voluntary. However, failure to supply a SSN may result in errors in processing the information provided.

**25CFR Section 537.I(b)(4) NOTICE REGARDING FALSE STATEMENTS**

A false statement knowingly and willfully provided in any of the information pursuant to this section may be grounds for not approving the contract in which I have a financial interest or management responsibility, or for disapproving or voiding such contract after it is approved by the Chairman of the National Indian Gaming Commission. Also, I may be punished by fine or imprisonment (U.S. Code, title 18, section 1001).

\_\_\_ New Hire    \_\_\_ Re-Hire    \_\_\_ Native American    \_\_\_ Tribal Member

**PLEASE PRINT**

Position(s) Applied For: \_\_\_\_\_ Date of Application: \_\_\_ / \_\_\_ / \_\_\_

Referral Source:

- Advertisement
- Employee
- Relative
- Government Employment Agency
- Walk In
- Private Employment Agency
- Other: \_\_\_\_\_

Name of Source (If Applicable): \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip Code

Social Security #: \_\_\_ / \_\_\_ / \_\_\_ ID# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Telephone #: (\_\_\_) \_\_\_\_\_ Other Phone #: (\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

If necessary, when is the best time to contact you at home? ..... : AM/PM

May we contact you at work? .....  Yes  No

If yes, please provide work number and best time to call ..... ( ) : AM/PM

Have you submitted an application here before? .....  Yes  No

If yes, please provide date(s) and position(s) applied for: \_\_\_\_\_

Have you ever been employed here before? .....  Yes  No

If yes, please give dates ..... From / / To / /

Have you ever been denied a gaming license? .....  Yes  No

If yes, please provide date(s) and details: \_\_\_\_\_

Are you legally eligible for employment in this country? .....  Yes  No

Date available for work ..... / / What is your desired salary range? ..... \$ \_\_\_\_\_

Type of Employment Desired:  Full-Time  Part-Time  Temporary

Are you able to meet the attendance requirements of the position? .....  Yes  No

Will you work overtime if required? .....  Yes  No

If no, please explain: \_\_\_\_\_

Have you ever pled "guilty" or "not contest" to, or been convicted of a crime? .....  Yes  No

If yes, please provide date(s) and details: \_\_\_\_\_

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

# EMPLOYMENT HISTORY

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 comments section below.

<b>EMPLOYER</b>	<b>TELEPHONE #</b> (   )	<b>DATES EMPLOYED</b>	<b>SUMMARIZE THE TYPE OR WORK PERFORMED AND JOB RESPONSIBILITIES</b>
<b>ADDRESS</b>		<b>FROM</b>	<b>TO</b>
<b>STARTING JOB TITLE/ FINAL JOB TITLE</b>		<b>HOURLY RATE/SALARY STARTING</b>	
<b>IMMEDIATE SUPERVISOR AND TITLE</b>		<b>\$</b>	<b>PER</b>
<b>REASON FOR LEAVING</b>		<b>DATES EMPLOYED</b>	
<b>MAY WE CONTACT FOR REFERENCE?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		<b>FROM</b>	<b>TO</b>
<b>EMPLOYER</b>	<b>TELEPHONE #</b> (   )	<b>DATES EMPLOYED</b>	<b>SUMMARIZE THE TYPE OR WORK PERFORMED AND JOB RESPONSIBILITIES</b>
<b>ADDRESS</b>		<b>FROM</b>	<b>TO</b>
<b>STARTING JOB TITLE/ FINAL JOB TITLE</b>		<b>HOURLY RATE/SALARY STARTING</b>	
<b>IMMEDIATE SUPERVISOR AND TITLE</b>		<b>\$</b>	<b>PER</b>
<b>REASON FOR LEAVING</b>		<b>DATES EMPLOYED</b>	
<b>MAY WE CONTACT FOR REFERENCE?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		<b>FROM</b>	<b>TO</b>
<b>EMPLOYER</b>	<b>TELEPHONE #</b> (   )	<b>DATES EMPLOYED</b>	<b>SUMMARIZE THE TYPE OR WORK PERFORMED AND JOB RESPONSIBILITIES</b>
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<b>IMMEDIATE SUPERVISOR AND TITLE</b>		<b>\$</b>	<b>PER</b>
<b>REASON FOR LEAVING</b>		<b>DATES EMPLOYED</b>	
<b>MAY WE CONTACT FOR REFERENCE?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		<b>FROM</b>	<b>TO</b>

**COMMENTS    INCLUDING GAPS IN EMPLOYMENT**


**SKILLS AND QUALIFICATIONS**

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.


**EDUCATIONAL BACKGROUND IF JOB RELATED**

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or class rank. E. Major field of study F. Minor field of study (if applicable).

A. SCHOOL	B. NUMBER OF YEARS COMPLETED	C. DEGREE OR DIPLOMA	D. GRADE/ CLASS RANK	E. MAJOR	F. MINOR

**REFERENCES**

Please list the name and telephone number of three references, not including family members or supervisors previously listed in the employment history section.

NAME	TELEPHONE	NUMBER OF YEARS KNOWN
	( )	
	( )	
	( )	

**ADDITIONAL INFORMATION**

List professional, trade, business, or civic associations and any offices held. Exclude memberships that would reveal race, color, sex, national origin, citizenship, age, mental or physical disabilities, Veteran/Reserve National Guard or any other similarly protected status.

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc. Exclude memberships that would reveal race, color, sex, national origin, citizenship, age, mental or physical disabilities, Veteran/Reserve National Guard or any other similarly protected status.

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List any additional information you would like us to consider.

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## APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with Red Fox Casino 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, 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 90 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, without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period of time or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the General Manager.

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 and I-9 Form in this regard.

Are you an enrolled member of any Indian Tribe?  Yes  No

If yes, please identify the Tribe and provide your Tribal Number: \_\_\_\_\_

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**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: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Authorization to Obtain a Consumer Credit Report and  
Release of Information for Employment Purposes**

Pursuant to the federal Fair Credit Reporting Act, I hereby authorize the Cahto Tribe of Laytonville and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for employment. I understand the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: verification of Social Security number; current and previous residences; employment history, including all personnel files; education; references; credit history and reports; criminal history, including records from any criminal justice agency in all or all federal, state or county jurisdictions; birth records; motor vehicle records, including traffic citations and registration; and any other public records.

I, \_\_\_\_\_, authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation or public agency may have. I understand that I must provide my date of birth to adequately complete said screening and acknowledge that my date of birth will not affect any hiring decisions. I hereby authorize and request any present or former employer, school, police department, financial institution or other persons having personal knowledge of me to furnish the Cahto Tribe of Laytonville or its designated agents with any and all information in their possession regarding me in connection with an application of employment. I am authorizing that a photocopy of this authorization be accepted with the same authority as the original.

I hereby release the Cahto Tribe of Laytonville and its agents, officials, representatives or assigned agencies, including officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release. You may contact me as indicated below. I understand that a copy of this authorization may be given at any time, provided I do so in writing.

I understand that, pursuant to the federal Fair Credit Reporting Act, if any adverse action is to be taken based upon the consumer report, a copy of the report and a summary of the consumer's right will be provided to me.

**Please print clearly**

Name (Full) \_\_\_\_\_

Maiden Last Name \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State Issued \_\_\_\_\_

Name on Driver's License \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



**AFFIRMATIVE ACTION VOLUNTARY INFORMATION**

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

**FOR ADMINISTRATIVE USE ONLY**

Position(s) applied for  Available  Unavailable

Other positions considered for: \_\_\_\_\_

\_\_\_\_\_

HIRED  Yes  No

Position hired for: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_