

MOORETOWN RANCHERIA FORESTRY CONTRACT SERVICES 1 ALVERDA DRIVE OROVILLE, CA 95966 (530) 533-3625

APPLICATION FOR EMPLOYMENT

| | ☐ New Hire | ☐ Tribal Member | | |
|-----------------------------------|--------------------------------------|---------------------------|-------------------------|-----------|
| | ☐ Rehire | ☐ Native American | ı | |
| sition(s) Desired: | | | Date: | |
| Last Name | First Name | | Middle Name | |
| Street Address | | | Home Telephone | |
| City, State, Zip Code | | | Message Telephone | |
| Are you over the age of 21? | YesN | No | Sex:Male _ | |
| Email: | | | | |
| Tribal Affiliation: | | Roll #: | | |
| Have you ever applied for empl | | | | |
| Yes | No If yes, mo | onth and year: | | |
| Do you have any relatives emp | loyed at Mooretown Rancheria or | r one of its enterprises? | | |
| Yes | No If yes, nar | me of relatives: | | |
| | oyment in the United States? | | (If no, please explain) | |
| Are you available for full-time w | ork (apart from absence for religion | ous observance)? | Yes | No |
| If not, what hours/days can you | work? | | | |
| | | | | |
| | | | | |
| List residences for the pas | | 21.1 | I = 44.04 \ = | (11.04) |
| | et 10 years: County | State | From (Mo/Yr) T | o (Mo/Yr) |
| List residences for the pas | | State | From (Mo/Yr) T | o (Mo/Yr) |
| List residences for the pas | | State | From (Mo/Yr) T | o (Mo/Yr) |

Employment History: List your job history for the past 10 years, beginning with your current or most recent employer. The employer's phone number and dates of employment are required. Continue on the reverse side, if necessary.

| Employer: | Address City | State Zip Code | Phone | |
|--|------------------|------------------------------|------------------|-------------|
| Supervisor: | | | | |
| | • | Dates of I | Employment | |
| Job Title: | | From: | To: | _ |
| Job Duties: | | | | <u>-</u> |
| | | | | _ |
| Why did you leave | e this position? | | | _ |
| Frankrian | A daluaca Cita | · Chaha Zin Cada | Phone | |
| Employer: | Address City | State Zip Code | Pnone | |
| Supervisor: | | | | |
| | | Dates of I | Employment | |
| Job Title: | | From: | To: | _ |
| Job Duties: | | | | _ |
| | | | | _ |
| | | | | _ |
| Why did you leave | e this position? | | | _ |
| Employer: | Address City | State Zip Code | Phone | |
| | | | | |
| Supervisor: | | | | |
| Supervisor: | | Dates of | Employment | |
| Supervisor: Job Title: | | | Employment To: | |
| | | | | |
| Job Title: | | | | |
| Job Title: Job Duties: | e this position? | | | |
| Job Title: | e this position? | | | - - - |
| Job Title: Job Duties: | | | | |
| Job Title: Job Duties: Why did you leave | | From: | To: | |
| Job Title: Job Duties: Why did you leave | | From: | To: | - |
| Job Title: Job Duties: Why did you leave | | r State Zip Code Dates of I | To: | - |
| Job Title: Job Duties: Why did you leave Employer: Supervisor: Job Title: | Address City | State Zip Code Dates of I | Phone Employment | - |
| Job Title: Job Duties: Why did you leave Employer: Supervisor: Job Title: | | State Zip Code Dates of I | Phone Employment | - |
| Job Title: Job Duties: Why did you leave Employer: Supervisor: | Address City | State Zip Code Dates of I | Phone Employment | - |

| Name & Location No. of Years Date Completed Obegree digh School Completed Completed Degree digh School College Business/Trade/Technical References: List three personal references. Do not include supervisors listed in the Employment History section. Name Address Phone Inderstand the Immigration Reform and Control Act of November 6, 1986, requires me to prove the legality of my residency or citizenship. I had so aware that the failure to provide such proof at the time of request may legally force my termination. Junderstand that pothing con- | |
|---|--|
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| also aware that the failure to provide such proof at the time of request may legally force my termination. I understand that nothing con- | |
| ed in this employment application or in granting of an interview is intended to create a contract between myself and Mooretown Rancheria for er my employment or the provision of any benefits. I further understand that if an employment relationship subsequently is established, | |
| I have the right to terminate my employment at any time and Mooretown Rancheria will have a similar right. In addition, I understand that promise, representation or agreement contrary to the foregoing is binding on Mooretown Rancheria unless made in writing and signed myself and an authorized representative of Mooretown Rancheria. | |
| derstand that if I am considered for employment, the Mooretown Gaming Commission, a separate regulatory agency of the Mooretown | |
| ncheria, will investigate my background and employment history, including a credit and criminal record check. ecifically consent to this investigation. | |
| ertify that all answers to questions in this application and additional information I may have submitted are true and complete to the best of | |
| knowledge. I understand that giving false information, misrepresenting facts, and material omissions may be grounds for denial of ployment or discharge if hired. I hereby authorize investigation of all statements and references provided during the application process | |
| ployment or discharge if hired. I hereby authorize investigation of all statements and references provided during the application process give Mooretown Rancheria and the Mooretown Gaming Commission any and all pertinent information they may have, personal or otherwise, d release from all liability or responsibility, Mooretown Rancheria, the Mooretown Gaming Commission, any agent of either entity and all resons, companies or corporations providing information to Mooretown Rancheria or the Mooretown Gaming Commission about me. | |
| | |
| release from all liability or responsibility, Mooretown Rancheria, the Mooretown Gaming Commission, any agent of either entity and all | |

Mooretown Rancheria is proud to offer a drug free work environment

Date

Applicant's Signature



Mooretown Rancheria

Available Hours of Work

| Name: | Date: | | |
|---|-------------------|-----------------------|--|
| Are you available for Grave shifts? | Yes | No | |
| Are you available for Swing shifts? | Yes | No | |
| Are you available Weekends? | Yes | No | |
| Do you have any work conditions to dates or | times you would l | ike us to know about? | |
| | | | |
| | | | |
| | | | |
| Date | Appl | icant's Signature | |



MOORETOWN RANCHERIA

Request, Authorization and Consent to Release of Employment Information

| Name (Please Print) | Duic | |
|--|------------------------|--|
| | Date | |
| I hereby release and hold any person, organization or previous en information to the Mooretown Rancheria Human Resources Deparance from its investigation of my background. | | |
| I authorize all past employer or agents that they may designate to respond to verbal or written inquiries from Mooretown Rancher regarding my employment record, including but not limited to posheld, dates of employment, last pay rate, and work performance, disciplinary records, reliability and any incidents of dishonesty, in and or unsafe, harmful or threatening behavior. | ria sitions | |
| Mooretown Rancheria Human Resources Department regarding m | ny previous employment | |

Signature