

LAKE ELSINORE CASINO

APPLICATION FOR EMPLOYMENT

Visit <http://lercasino.com/careers> to see what positions are available
Once application is completely filled you can email it to jobs@lercasino.com or drop it off at the Hotel Front Desk at
Lake Elsinore Casino - 20930 Malaga Road - Lake Elsinore, CA 92530

Name _____
Last First Middle

Address _____
Street City State Zip

Contact _____
Home Mobile Email

Date of Application: _____ Position Applying For: _____

Positions Applying for:

Casino		Hotel		Maintenance	Admin / Public Safety
<input type="checkbox"/> Dealer - Pan	<input type="checkbox"/> Dealer - Other	<input type="checkbox"/> Casino Host	<input type="checkbox"/> Front Desk	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Administrative
<input type="checkbox"/> Dealer - 21	<input type="checkbox"/> Chip Runner Server	<input type="checkbox"/> Tournaments	<input type="checkbox"/> House Person	<input type="checkbox"/> Landscaper	<input type="checkbox"/> Public Safety
<input type="checkbox"/> Dealer - Poker	<input type="checkbox"/> Chip Runner	<input type="checkbox"/> Cage Agent	<input type="checkbox"/> Housekeeping		
<input type="checkbox"/> Dealer - Pai Gow	<input type="checkbox"/> Porter	<input type="checkbox"/> Board Person	<input type="checkbox"/> Laundry Attendant	<input type="checkbox"/> Other _____	

We consider all applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-related medical condition, handicap, or other legitimate protected status.

How did you hear about us? _____

Are you over 21 years of age? Yes No

Have you been employed here before? Yes No

Have you been convicted of any felonies or misdemeanors? Yes No

If so, please explain _____

Are you eligible to lawfully work in the US,
and if so, are you able to provide necessary documentation? Yes No

On what date will you be available to work? _____

Do you prefer: Full-time Part time / Days Swing Graveyard

If hired, do you have reliable means of transportation? Yes No

How much would you like to earn in this position? \$ _____

Do you have any friends or relatives presently working for us? Yes No

If yes, friend's or relative's name _____

Previous Employment: List your last five (5) years of Employment – Starting with your last job

Company: _____

Phone: _____

Address: _____

Supervisor: _____

Job Title: _____

(optional)
Starting Salary \$ _____

(optional)
Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____

Reason for Leaving: _____

May we contact your previous supervisor for a reference?

YES

NO

Company: _____

Phone: _____

Address: _____

Supervisor: _____

Job Title: _____

(optional)
Starting Salary \$ _____

(optional)
Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____

Reason for Leaving: _____

May we contact your previous supervisor for a reference?

YES

NO

Company: _____

Phone: _____

Address: _____

Supervisor: _____

Job Title: _____

(optional)
Starting Salary \$ _____

(optional)
Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____

Reason for Leaving: _____

May we contact your previous supervisor for a reference?

YES

NO

Company: _____

Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ (optional) Starting Salary \$ _____ (optional) Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Education Background

High School _____ City _____ Did you graduate? Yes No
College _____ City _____ Degree Received _____
Trade School _____ City _____ Diploma Received _____
Dealer _____

References: Give the name, address and telephone number of three references who are not related to you

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Emergency Information: List name, address and phone number of person(s) to contact in case of emergency

Name	Relation	Address	Phone
_____	_____	_____	_____
_____	_____	_____	_____

For Safety Security Officer Applicants Only

CA Guard Card#: _____ CA Pepper Spray: _____
CA Firearm#: _____ CA Baton#: _____
_____:CPR/First Aid

DO NOT WRITE BELOW THIS - For Office Use Only

This area must be filled out completely only by Department Manager/ Supervisor that would conduct Interview/ Audition

Interview By: _____ Date: _____ Position/Shift: _____

Remarks: _____

Neatness: _____

Ability: _____

Proceed to 2nd Interview? Yes No

Pay: _____

Approved By: _____ Mgmt. Approval: _____ Date: _____

2nd Interview By: _____ HR Approval: _____ Date: _____

Confidential

This last page should ONLY be filled by Applicant once “Proceed to 2nd Interview” has been checked.

This should only apply to those who are considered for employment after initial interview/ audition from a Department Manager.

Drug and Alcohol Screening Test Consent

We have a vital interest in a safe, healthful and efficient environment for our employees, customer and visitors. Accordingly, to protect the above, as well as safeguard our property, equipment and operation, we have established a drug and alcohol policy prohibiting employee’s use, possession, purchase and transfer of alcohol or drugs in the work place.

_____, freely and voluntarily agree to submit to a drug and alcohol screening test at a medical facility designated by my employer and fully understand and acknowledge that I will not be eligible for hire unless I pass the medical test. I also understand and agree to random testing for drugs and alcohol during employment with your casino.

Signature _____

Date _____

Background Check Consent

I _____ understand that I must pass a background check in order to be employed here

Former Name(s) _____ Social Security Number _____

Previous Address _____

Birthdate ___/___/___ Driver’s License Number/State _____

I hereby authorize Lake Elsinore Casino and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report to be generated for employment purposes. I understand that the scope of the investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, educational background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

The information contained is correct to the best of my knowledge. I also understand that if I cannot pass the required background check administered and required by the Division of Gambling Control I voluntarily resign my position at the Lake Elsinore Casino with no claims to any benefits.

Signature _____

Date _____

Applicant Statement

I understand and agree that the employment for which I am making application is, and intended to be, "At Will" and such employment may be terminated at any time with or without cause, with or without prior notice by either my employer or me. Any change to the "At Will" employment relationship can only be made in writing and only by the managing partner.

Any offer of employment have been read, are understood, and if offer is herewith accepted. I understand that my employment is contingent upon completion of background check, drug test, or any other contingencies the employer and/or Department of Justice require for position(s).

I certify that the information contained in this application is correct to the best of my knowledge and understand that misrepresentation or omission of facts called for may result in denial of employment or discharge. I authorize investigation of all statements contained in this application.

Signed

Date