



APPLICATION FOR EMPLOYMENT

777 JUMER DRIVE

ROCK ISLAND, IL 61201

(309) 756-4798

WWW.JUMERSCASINOHOTEL.COM



APPLICATION FOR EMPLOYMENT

Applicants are considered for all positions without regard to race, religion, sex, national origin, age, marital status, veteran status or disability.

Please Print

Date of Application: _____

Position(s) Applied For: 1st _____ 2nd _____ 3rd _____

Referral Source: Employee _____ Employment Agency: _____

Website: _____ Newspaper: _____

Other (Job Fairs, etc.): _____ Walk-In

PERSONAL INFORMATION

Name: _____
Last First Middle Initial

Other names worked under (for reference purposes only): _____

Address: _____
Street Address City State Zip Code

Primary Telephone: (____) _____ - _____ Secondary Telephone: (____) _____ - _____

Social Security Number: _____ - _____ - _____ Email Address: _____

Are you 18 years of age or older? Yes No

You must be 18 years of age to work in a non-gaming-related position.

Are you 21 years of age or older? Yes No

You must be 21 years of age to work in the casino.

Have you ever been employed by Jumer's Yes No If so, when? _____

Have you ever been discharged? Yes No

Are you on a lay-off or subject to a recall? Yes No

Have you been convicted of a felony? Yes No

Felonies typically consist of the following convictions: Drug Possession, Aggravated or Sexual Assault, Kidnapping, Homicide

Have you been convicted of a misdemeanor or crime of moral turpitude? Yes No

Misdemeanors and crimes of moral turpitude typically consist of the following convictions: Drug Possession, Battery, Assault, DUI, Domestic Violence

If you answered "Yes" to either of the two previous questions, please explain: _____



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Can you perform the essential functions of the position for which you are applying? Yes No

Date you are available to begin work: _____

Type of employment you are seeking: 1st Shift 2nd Shift 3rd Shift
 Part-Time Full-Time

EDUCATION

| | Elementary | High School | College/University | Graduate/Professional |
|---------------------------|--|--|---|---|
| School Name | | | | |
| Location | | | | |
| Years Completed | <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 | <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 |
| Course of Study | | | | |
| Graduated, GED, or degree | | | | |

Honors Received: _____

U.S. Military Veteran: Yes No From: _____ To: _____

Please list 3 personal references not related to you and are not previous employers.

| Name | Address | Phone Number |
|------|---------|--------------|
| | | |
| | | |
| | | |

EMPLOYMENT EXPERIENCE

In the space below, please detail your employment history beginning with your present or most recent employer. Include periods of unemployment. Use back of 3rd page if additional space is needed. Please provide as much information as possible.

1 - CURRENT OR MOST RECENT EMPLOYER

Employer: _____ **Dates Employed** From: _____ To: _____

Address: _____
Street Address City State Zip

Telephone: _____ Job Title: _____

Job Duties: _____

Supervisor: _____ **Hourly Wage** Starting: _____ Final: _____

Reason for Leaving: _____



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2nd – FORMER EMPLOYER

Employer: _____ **Dates Employed** From: _____ To: _____

Address: _____
Street Address City State Zip

Telephone: _____ Job Title: _____

Job Duties: _____

Supervisor: _____ **Hourly Wage** Starting: _____ Final: _____

Reason for Leaving: _____

3rd – FORMER EMPLOYER

Employer: _____ **Dates Employed** From: _____ To: _____

Address: _____
Street Address City State Zip

Telephone: _____ Job Title: _____

Job Duties: _____

Supervisor: _____ **Hourly Wage** Starting: _____ Final: _____

Reason for Leaving: _____

ADDITIONAL INFORMATION

Please state any additional information you feel may be helpful to us in considering your application.

CERTIFICATION

I certify that answers given herein are true and complete. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in termination. I understand, also, that I am required to abide by the rules and regulations of this Company.

I understand that I may be required to submit to a pre-employment drug test. I also understand that the company conducts regular random drug testing which I could be selected for.

Date

Signature