

Grand Casino Employment Application

Applicant Information

Full Name: _____ Date: _____
Phone: _____ Email: _____
Street: _____
City: _____ State: _____ Zip: _____

Position Information

Position: _____ Start Date: _____
Authorized to Work in the US: Yes No Over 21: Yes No
Availability: Full-Time Part-Time Temp

Gaming License

WA License: Yes No Other Jurisdiction: Yes No

Work Experience

Company: _____ Phone: _____
Title: _____ Supervisor: _____
Dates: _____ Pay: _____ Reason: _____
May Contact Employer

Company: _____ Phone: _____
Title: _____ Supervisor: _____
Dates: _____ Pay: _____ Reason: _____
May Contact Employer

Education

High School Graduate: Yes No College Graduate: Yes No

Skills / Certifications: _____

References

Reference: _____ Phone: _____
Reference: _____ Phone: _____

Applicant Certification and Acknowledgments

I certify that the information provided in this application is true, complete, and accurate to the best of my knowledge. I understand that any false statements, omissions, or misrepresentations may result in disqualification from employment or termination if discovered after hire.

I understand that submission of this application does not guarantee employment, an interview, or that Grand Casino will contact me regarding this application.

I understand that, if hired, my employment with Grand Casino will be at-will, meaning that either I or the Company may terminate the employment relationship at any time, with or without cause or notice, subject to applicable law.

I authorize Grand Casino to verify my employment history, education, and references, and to conduct background checks or other screenings as permitted by applicable law. I understand that certain positions may require obtaining and maintaining a valid gaming license, and failure to do so may result in termination.

I understand that Grand Casino complies with all applicable federal, state, and local laws, including those related to equal employment opportunity and protected leave.

Electronic Signature Consent

By typing my name below and submitting this application, I acknowledge and agree that this constitutes my electronic signature, which has the same legal effect as a handwritten signature. I certify that I am the individual completing this application.

I certify that the information provided is true and complete. Employment is at-will.

Signature: _____ Date: _____