

EMPLOYMENT APPLICATION

01-Grand Casino Mille Lacs
 02-Grand Casino Hinckley
 10-Mille Lacs Corporate Ventures
 11-Grand Makwa Cinema

21-Subway
 23-Grand Market
 53-Print Shop
 54-Hinckley Laundry LLC

31-Mille Lacs Gas
 31-East Lake Convenience
 31-Lake Lena Marathon
 60-ML Wastewater

48-Eddy's Resort
 12-Taco John's
 12-Super Stop
 12-Wewinabi

Last Name	First Name	Middle Name

Have you ever worked or attended school under another name? If yes, Name: _____

Present Address	City	State	Zip

County	Phone #

E-Mail Address	Alternate Phone #

AMERICAN INDIAN PREFERENCE
 (As an American Indian Preference employer, we ask that you please answer the following questions)
TRIBAL ID # MUST BE PROVIDED FOR YOU, YOUR SPOUSE OR YOUR DESCENDENT TO BE ELIGIBLE FOR THE AMERICAN INDIAN HIRING PREFERENCE

Are you a member of a federally recognized American Indian Tribe?	Which Tribe/Band are you enrolled with?	Please list your Tribal ID #:	Are you a husband or wife of an enrolled Mille Lacs Band Member (must provide your Marriage License and Tribal ID of spouse)?	Are you a 1 st generation descendent of a Mille Lacs Band Member (must provide your Birth Certificate and Tribal ID of parents)
Yes <input type="checkbox"/> No <input type="checkbox"/>			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

OTHER INFORMATION

Do you have a right to remain and work permanently in the U.S.? Yes No Where did you hear about employment opportunities? _____

18 years of age or older? Yes No If hired you may be required to show legal proof of age

Have you ever worked for the following properties? Yes No If yes please mark appropriate boxes

Grand Casino Mille Lacs	Grand Casino Hinckley	Corporate Commission	Dates of employment: _____

Under What Name: _____ Department: _____

EMPLOYMENT AVAILABILITY

Position (YOU MUST SPECIFY WHAT POSITION YOU ARE APPLYING FOR) _____

Applying for:	Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>	Temporary <input type="checkbox"/>	On Call <input type="checkbox"/>	Shift Preference:	Day <input type="checkbox"/>	Swing <input type="checkbox"/>	Grave <input type="checkbox"/>	Rotating <input type="checkbox"/>
Please state days or time you cannot work _____					When are you available for employment? _____				

PREVIOUS EMPLOYMENT
 Please list your most current and previous places of employment

Last or Present Employer	Address	City	State	Zip	Phone #	
Supervisor's Name		Reason for Leaving		Dates Employed		Job Held

Last or Present Employer	Address	City	State	Zip	Phone #	
Supervisor's Name		Reason for Leaving		Dates Employed		Job Held

PLEASE COMPLETE REVERSE SIDE

PREVIOUS EMPLOYMENT

(continued)

Form with fields: Last or Present Employer, Address, City, State, Zip, Phone #, Supervisor's Name, Reason for Leaving, Dates Employed, Job Held

EDUCATION

Form with fields: High School, Graduated, Yes, No, City, State, GED (obtained), Yes, No, Expected Graduation Date

EDUCATION

Form with fields: College, Graduated, Yes, No, City, State, Degree (obtained), Yes, No, Degree Type, Major/Minor, Number of Years Attended, Expected Graduation Date

PERSONAL INFORMATION

Form with fields: Do you have a relative(s) in our employ?, Yes, No, If Yes, Name(s), Department & Position

PERSONAL REFERENCES

Form with fields: Name, Phone #, Name, Phone #, Name, Phone #

NOTICE TO APPLICANTS AS REQUIRED BY THE FAIR CREDIT REPORTING ACT

As part of our employment process a routine inquiry may be made with respect to an applicant's credit status, character, general reputation, personal characteristics, and mode of living. Additional information as to the nature and scope of such a report, if made, will be provided upon written request of the applicant.

TITLE VII

Federal Law prohibits discrimination in employment because of race, religion, color, age, sex, national origin, or veteran status, disability or any other legally protected status, except as otherwise provided in the company's state tribal compact.

AGREEMENT

I certify that the statements I have made in this application are true, accurate and complete to the best of my knowledge. If employed, I agree to familiarize myself promptly with all Company rules and regulations and faithfully abide by them. I understand that falsification or misrepresentation of any information I have provided the Company may be cause for dismissal at any time during my employment. I authorize the Company to secure and review reports from previous employers, motor vehicle records and law enforcement agencies and acknowledge that the Company has no liability whatsoever for such review or utilization of such reports. I agree to submit proof of my age and my legal right to work before beginning employment with the Company. I understand that my filling out this application does not indicate there is a current job opening and does not obligate the Company to hire me. I understand that I may be required to be eligible for a gaming license through the Gaming Regulatory Authority of the Mille Lacs Band. I also understand that the job offer is conditional upon passing an alcohol and drug test. I further understand that, if, hired my employment is for no definite period and may be terminated by the Company at any time without cause or reason.

Signature: _____ Date: _____

HUMAN RESOURCES USE ONLY

Date Received/Logged: _____ Date Returned for Required Information: _____

Eligible for Rehire: Yes No Date Eligible: _____ Signature: _____

Contacted: _____ Date/Initials _____ Date/Initials _____ Date/Initials _____ Date/Initials _____ Date/Initials _____ Date/Initials _____



WEWINABI

Employment Background Investigation

Full Name: _____
(First) (Middle) (Last)

Date of Birth: _____ Social Security Number: _____

If applicable, please list other name(s) used i.e., married, maiden, alias, alternate spellings, and/or nicknames:

Criminal Record: Please check the box to all that apply

- I have been convicted of a felony or gross misdemeanor within the previous one (1) year. *(Excluding DUI/DWI/OWI)*
- I have been released from a significant period of incarceration *(defined as more than 30 days)* within the previous one (1) year

I have been convicted of and/or have charges pending for the following types of crimes:

- Criminal Sexual Conduct
- Theft
- Fraud
- Misrepresentation of any kind, including but not limited to theft by fraud, worthless checks, auto theft, welfare fraud, falsification of documents, false identification, etc.
- Homicide
- Assault

AUTHORITY TO RELEASE INFORMATION FORM

I hereby certify that all the statements and answers set forth on the employment application are true and complete to the best of my knowledge, and I understand that if, subsequent to employment, any such statements and/or answers are found false or that information has been omitted, such false statements or omissions will be just cause for termination.

I acknowledge and agree that I am executing the Authority to Release Information voluntarily and have the right to receive a copy of it upon written request. A reproduction of this authorization is the same as the original.

I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information to the Mille Lacs Corporate Ventures for the purpose of employment with this agency.

The expiration of this authorization shall be one (1) year from the date of my signature.

I certified that I have read, understand, and agree to the forgoing statements.

Signature of Applicant/Date: _____