APPLICATION FOR EMPLOYMENT

DIVI CARINA BAY CASINO
St. Croix, USVI

5035 TURNER HOLE ▪ CHRISTIANSTED, VI 00820

340-773-PLAY(7529)
www.carinabay.com

Divi Carina Bay Casino is committed to equal employment opportunities for all of its applicants. Hiring is done on the basis of abilities and qualifications without regard to race, color, national origin, sex, age, or disability. ALL positions require you be at least 21 years of age.

PLEASE PRINT CLEARLY/ANSWER ALL QUESTIONS

LAST NAME	FIRST NAME	MIDDLE NAME	DATE

PRESENT STREET ADDRESS	CITY	STATE	ZIP

PHONE NUMBER	SOCIAL SECURITY #

Positions applying for:	***Positions applying for:***
CIRCLE ONE: FULL-TIME ☐ PART-TIME ☐ EITHER ☐ — DESIRED SALARY: ------------------	CIRCLE ALL SHIFTS YOU ARE *AVAILABLE TO WORK*: *DAYS* ☐ *SWING* ☐ GRAVE ☐ ANY ☐

EMPLOYMENT HISTORY: Beginning with your most recent employment, list below all employment for the past 10 years; Include summer or part-time employment. For unemployment or self-employed periods show dates, locations and earnings (if any).

COMPANY NAME, CITY AND STATE	EMPLOYMENT DATES		YOUR JOB TITLE & SUPERVISOR'S NAME	WHY DID YOU LEAVE?
NAME	FROM	TO	TITLE:	
CITY	STARTING PAY	ENDING PAY	SUPERVISOR	
STATE			PHONE	MAY WE CONTACT YOUR EMPLOYER? YES ☐ NO ☐
NAME	FROM	TO	TITLE:	
CITY	STARTING PAY	ENDING PAY	SUPERVISOR	
STATE			PHONE	MAY WE CONTACT YOUR EMPLOYER? YES ☐ NO ☐
NAME	FROM	TO	TITLE:	
CITY	STARTING PAY	ENDING PAY	SUPERVISOR	
STATE			PHONE	MAY WE CONTACT YOUR EMPLOYER? YES ☐ NO ☐
NAME	FROM	TO	TITLE:	
CITY	STARTING PAY	ENDING PAY	SUPERVISOR	
STATE			PHONE	MAY WE CONTACT YOUR EMPLOYER? YES ☐ NO ☐

EDUCATION (MUST HAVE HIGH SCHOOL DIPLOMA OR GED)

HIGH SCHOOL AND/OR COLLEGE ATTENDED	CITY	STATE	DIPLOMA OR GED	GRADUATED?

EQUIPMENT SKILLS

CHECK ANY OF THE FOLLOWING YOU HAVE KNOWLEDGE OF IF YOU BELIEVE THEY ARE RELEVANT TO THE POSITION YOU ARE APPLYING FOR:

☐ MICROSOFT WORD ☐ MICROSOFT ACCESS ☐ POINT OF SALE SYSTEM
☐ MICROSOFT EXCEL ☐ KRONOS PAYROLL SYSTEM ☐ 10-KEY CALCULATOR
☐ OTHER ____

HAVE YOU EVER BEEN EMPLOYED AT DIVI CARINA BAY? YES ☐ NO ☐ IF SO, WHEN.
DO YOU RESIDE IN THE SAME HOUSEHOLD OR ARE YOU RELATED TO ANYONE EMPLOYED AT DIVI CARINA BAY? YES ☐ NO ☐
NAME: RELATIONSHIP:
IF REQUIRED FOR YOUR JOB CATEGORY, WILL YOU TAKE A PRE-EMPLOYMENT DRUG TEST? YES ☐ NO ☐
IF HIRED, CAN YOU PRESENT **STATE** OR **FEDERALLY** ISSUED IDENTIFICATION? YES ☐ NO ☐

ADDITIONAL TRAINING – LICENSES

REFERENCES

NAME	ADDRESS	PHONE NUMBER	YEARS KNOWN

ADDITIONAL INFORMATION

HAVE YOU EVER BEEN DISCIPLINED OR DISCHARGED FOR:

YES ☐ NO ☐ ABSENTEEISM
YES ☐ NO ☐ TARDINESS
YES ☐ NO ☐ INSUBORDINATION
YES ☐ NO ☐ FIGHTING OR ASSAULT
YES ☐ NO ☐ THEFT OR UNAUTHORIZED REMOVAL OF COMPANY PROPERTY
YES ☐ NO ☐ VIOLATING ORGANIZATION SAFETY RULES
YES ☐ NO ☐ VIOLATING ORGANIZATION ALCOHOL OR DRUG POSSESSION POLICIES

PLEASE EXPLAIN EACH "YES" ANSWER.

CONVICTIONS

HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A MINOR TRAFFIC VIOLATION? YES ☐ NO ☐

IF SO, LIST DISPOSITION:

MILITARY

BRANCH | RANK | RESERVE STATUS

DATE OF DISCHARGE | TYPE OF DISCHARGE

APPLICATION RELEASE

READ CAREFULLY BEFORE SIGNING

I hereby certify that the answers and statements given by me in this application are true and correct. I understand that any misrepresentation or omission of facts in this application, or during the course of an interview, may be justification for refusal of employment, or if employed, termination from employment. I authorize Divi Carina Bay ("the company") and its entities to investigate all that it believes is relevant to my employment application including, but not limited to, my employment history, educational background, credit history, and record of criminal convictions. I also authorize, my former employers, educational institutions, and individuals whom I have given as personal references, to provide information they may have about me in response to inquiry from the company as a result of my application for employment. I specifically consent to and authorize any agency of the criminal justice system to release to the company any records of criminal conviction as may be procured under NRS Chapter 179A, and understand that such records will not necessarily disqualify me for employment.

I also acknowledge that, if requested, I will submit to hair, blood, or urine tests to determine if I am drug free. I understand that my refusal to submit to such tests may result in withdrawal of any offer of employment, or if employed, termination of employment.

Applicant Signature _____ Date _____

Your E-Mail Address:_____ Referred by: _____

WHY DO YOU WISH TO WORK FOR DIVI CARINA BAY CASINO?

CLEAR FORM