



WE ARE AN EQUAL OPPORTUNITY EMPLOYER and our employment decisions are made without regard to race, color, religion, age, sex, national origin, gender identity, handicap, disability, veteran or marital status. We reasonably accommodate individuals with handicaps, disabilities and bona fide religious beliefs.

Spectra acknowledges the Indian Preference Act in hiring, transferring, promoting, and reduction in force. Under such policy, Spectra provides a preference in compliance with the Indian Preference Act and title 12 of the Gila River Community's Law and Order Code.

Please print clearly and answer all questions to the best of your ability:

Position(s) Applying for: _____

Date Submitted: _____ Which Location? Wild Horse Pass Lone Butte Vee Quiva Corporate

Expected Wage: _____ How did you learn about us? _____

Date available to start: _____ Have you been employed by Spectra or Ovations before? Yes No

APPLICANT CONTACT INFORMATION:

Last Name: _____ First Name: _____ Middle Name: _____ Suffix: _____

Mailing Address: _____ City: _____ State: _____ Zip Code: _____

(_____) _____ (_____) _____

Primary Phone Number: Mobile Home Secondary Phone Number: Mobile Home

Can we contact you by email? Yes No Email address: _____

List other names used for employment or education records: _____

EMPLOYMENT COMPLIANCE:

Are you legally eligible to work in the United States? Yes No Are you at least 18 years old? Yes No

Are you able to perform the essential functions of the job(s) for which you are applying? Yes No

If no, describe the functions that cannot be performed (Spectra complies with the American Disabilities Act):

WORK AVAILABILITY:

List hours available to work? _____ Days? MON TUE WED THU FRI SAT SUN

Are you available to work on weekends? Yes No Are you available to work overtime? Yes No

WORK RELATIONSHIPS:

Are you related to any employee of Spectra or its subsidiaries? Yes No

If yes, Name(s): _____ Relationship(s): _____

Have you ever worked for Gila River Gaming Enterprise or any of its vendors, associations or partners? Yes No

If yes, please list position and dates of employment: _____

CRIMINAL HISTORY:

Have you ever been convicted of a crime (felony or misdemeanor) other than a minor traffic offense? Yes No

Please note, a conviction may not necessarily disqualify you for employment.

If yes, please explain and give name of court, disposition and dates: _____

NATIVE AMERICAN PREFERENCE:

If you are an enrolled member of a federally recognized tribe please list the tribe below and be prepared to submit documentation at the time of your new hire orientation. Yes No

Tribe affiliation: _____ Enrollment number: _____

TRIBAL GAMING INFORMATION:

Have you ever had a Tribal Gaming License or other gaming license revoked, suspended or withdrawn? Yes No

Have you or are you involved with any existing, pending or postponed litigation that may prevent you from obtaining a Tribal Gaming License? Yes No

If yes to either or both questions, please list dates, gaming venue or Tribe and explain the situation: _____

EDUCATION, TRAINING, AND EXPERIENCE:

	School Name:	School City & State:	Years Completed:	Did you Graduate?	Degree/Diploma or Certification:
High School:					
College:					
Vocation/Other:					

List any experience, training or qualifications which make you especially suited to work at Spectra: _____

EMPLOYMENT HISTORY: List your present employer as well as previous employers. Account for all periods of unemployment. Please complete this section even if you attach a resume.

Is this your first job? This will be my first job. Therefore, I do not have any previous employment experience.

Company Name: _____ Phone Number: (_____) _____

Address: _____ Dates Employed: _____ to: _____

Name of Supervisor: _____ Starting Wage \$: _____ Ending \$: _____

Your Job Title: _____ Reason for leaving: _____

Describe work duties: _____

May we contact your current employer? Yes No

Company Name: _____ Phone Number: (_____) _____

Address: _____ Dates Employed: _____ to: _____

Name of Supervisor: _____ Starting Wage \$: _____ Ending \$: _____

Your Job Title: _____ Reason for leaving: _____

Describe work duties: _____

May we contact your current employer? Yes No

Company Name: _____ Phone Number: (_____) _____

Address: _____ Dates Employed: _____ to: _____

Name of Supervisor: _____ Starting Wage \$: _____ Ending \$: _____

Your Job Title: _____ Reason for leaving: _____

Describe work duties: _____

May we contact your current employer? Yes No

REFERENCES: List three people (no relatives) who have knowledge of your work performance within the last 3 years.

Reference #1 Name: _____ Organization/Company Name: _____ Contact #: (_____) _____

Reference #2 Name: _____ Organization/Company Name: _____ Contact #: (_____) _____

Reference #3 Name: _____ Organization/Company Name: _____ Contact #: (_____) _____

Applicant's Acknowledgment - Please read carefully and sign.

By signing below, I certify that the information I have given herein is true and complete to the best of my knowledge. I understand that any misrepresentation, omissions of facts, or incomplete answers on this application may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts on this application may be cause for immediate dismissal.

I understand that, if employed, my employment is at-will, not for a specific term and may be terminated at any time by me or the employer with or without cause or with or without notice. I further understand that no verbal promise, policy (including the Employee Handbook or any personnel manuals), business practice or other procedure will constitute an employment contract or modification of the at-will employment relationship between me and the employer.

I authorize the investigation of all matters outlined in this application and give the company and/or its designated agent(s) permission to contact previous employers, Tribal enrollment offices, and references. In addition, I authorize the investigation of my background, including consumer credit records, criminal convictions, motor vehicle record and other reports/records from various Federal, State and other agencies that maintain records related to the above mentioned items, as well as, claims records on file at insurance companies. I hereby release the company and any person giving or receiving any such information for any purpose related to my employment, from any liability as a result of such contacts and/or receipt of information. Information regarding credit and driving history will not be required, unless it is necessary and directly related to the position to which you applied.

I understand that I must obtain the proper gaming licensing through the Tribal Gaming Office and/or the Arizona Department of Gaming in order for me to begin work. And I further understand that I must maintain a gaming license in order to continue employment.

Applicant's Printed Name:

Applicant's Signature:

Date:

Please return your application to:

**Spectra Human Resources Office
Wild Horse Pass Corporate Center
5350 N. 48th Street, Suite 238
Chandler, Arizona 85226**

You can also email it to HR.Ovations@wingilariver.com