



# New Hire Application

Sevenwinds Casino, Lodge, & Conference Center is a drug-free facility  
New hires must pass a pre-employment drug screening.  
Applications and resumes will remain on file for 90 days.  
**Minimum age of 18 to be considered for employment.**

13767 W County Road B  
Hayward, WI 54843  
(715) 634-5643

**Incomplete applications may not be reviewed.**

For Office Use Only:		
Key	Non-Key	
Full-Time	Part-Time	
Day Shift	Swing Shift	Grave Shift

## CHECK ALL POSITIONS YOU ARE APPLYING FOR

Specific Position Applying for or check the following: \_\_\_\_\_

- |                                            |                                          |
|--------------------------------------------|------------------------------------------|
| <input type="checkbox"/> Accounting        | <input type="checkbox"/> Housekeeping    |
| <input type="checkbox"/> Administration    | <input type="checkbox"/> Lodge           |
| <input type="checkbox"/> Beverage          | <input type="checkbox"/> Maintenance     |
| <input type="checkbox"/> Cage/Vault        | <input type="checkbox"/> Marketing       |
| <input type="checkbox"/> Conference Center | <input type="checkbox"/> Revenue Audit   |
| <input type="checkbox"/> Drop team         | <input type="checkbox"/> Security Guard  |
| <input type="checkbox"/> Food Services     | <input type="checkbox"/> Slot Operations |
| <input type="checkbox"/> GSC               | <input type="checkbox"/> Table Games     |

Physical Record: Do you have any physical limitations that preclude you from performing any work for which you are applying? \_\_\_\_\_ If so, please describe \_\_\_\_\_

## PERSONAL INFORMATION

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ DOB (00/00/0000) \_\_\_\_\_

Mailing Address \_\_\_\_\_ Cell Phone Number \_\_\_\_\_ / Home Phone Number \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ Email Address \_\_\_\_\_

Alias Name (maiden, previous names used, etc.) \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Tribal Affiliation \_\_\_\_\_

Are you a veteran? Yes \_\_\_\_\_ No \_\_\_\_\_ Branch: \_\_\_\_\_

Do you have a valid Driver's License? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, issued by what state? \_\_\_\_\_

Driver's License # \_\_\_\_\_

Are you currently employed? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, may we inquire with your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Present employer & phone number: \_\_\_\_\_

Have you ever applied with this company before? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever worked for this company before? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, from \_\_\_\_\_ to \_\_\_\_\_

In what department/position? \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

**I understand and agree that if any deliberate misrepresentation for the following may result in a rejection of my application or, if employed, a termination from employment. \_\_\_\_\_ (initials)**

Have you ever been CONVICTED of a MISDEMEANOR? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been CONVICTED of a FELONY? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain number of conviction(s), nature of offense(s) committed, sentence(s) imposed, and type(s) of rehabilitation: \_\_\_\_\_

\_\_\_\_\_

**EDUCATIONAL BACKGROUND**

	School	City, State	Major	Degree Obtained
High School				
Undergraduate				
Graduate				
Technical				
License(s)/Certification(s)				

**EMPLOYMENT HISTORY (Starting with the most recent)**

	Employer Name/Address	Phone	Salary	Position	Reason for Leaving
From:	_____	_____	_____	_____	_____
To:	_____	_____	_____	_____	_____
From:	_____	_____	_____	_____	_____
To:	_____	_____	_____	_____	_____
From:	_____	_____	_____	_____	_____
To:	_____	_____	_____	_____	_____
From:	_____	_____	_____	_____	_____
To:	_____	_____	_____	_____	_____

Are there any other experiences, skills, or qualifications which you think would especially qualify you for employment with the Lac Courte Oreilles Casino and any of the positions that you have applied for?

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**PERSONAL/PROFESSIONAL REFERENCES**

Please do not list relatives as a reference.

**Name of Reference** \_\_\_\_\_

Business/Position \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

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Business/Position \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

**Name of Reference** \_\_\_\_\_

Business/Position \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

## Certification & Release

I certify that the information given by me on this application is true and correct to the best of my knowledge. I understand and agree that any deliberate misrepresentation during the application process may result in a rejection of my application or, if employed, a termination from employment.

I authorize investigations of all statements, contained herein and the references included, to give you any and all information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing the same to you.

Receipt of this application by the Sevenwinds Casino Lodge & Conference Center for consideration does not constitute a promise to interview or to offer employment with the Sevenwinds Casino Lodge & Conference Center.

I understand and agree that if hired, my employment is for no definite period and may, regardless of date of payment of my wages and salary, be terminated at any time without prior notice.

I further understand that it is my responsibility to keep my application updated with any changes and that my application will be kept on file for 3 months within the Sevenwinds Casino Lodge & Conference Center Human Resource department.

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**Signature of Applicant**

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**Date**