



4280 Harlow's Blvd. ♦ Greenville, MS 38701
(662) 335-9797 office ♦ (662) 335-8789 fax

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

All applicants will receive consideration for employment without regard to race, color, sex, religion, creed, national origin, age, disability or sexual orientation.

PLEASE PRINT (black/blue ink only). All Information must be completed. Be sure to sign and date and attach a copy of your resume to the application. Fax to: 662-335-8789 or mail to: Harlow's Casino Resort & Hotel C/O Human Resource Dept. 4280 Harlow's Blvd Greenville, MS. 38701

Drug Free Environment

PERSONAL DATA

Last Name _____ First Name _____ Middle Initial _____

Address _____

City _____ State _____ Zip Code _____

Home Phone Number (____) _____ - _____ Alternate Number (____) _____ - _____

Number of years at present address _____

Previous Address _____

City _____ State _____ Zip Code _____

Number of years at previous address _____

List any other names used during your previous employment or schooling _____

Have you ever been convicted of a crime or gaming offense? Yes ___ No ___

If Yes please explain _____

Are you at least 21 years of age? Yes ___ No ___

Have you ever served in the Military? Yes ___ No ___ Date of Discharge ___ / ___ / ___ Rank _____

Position Desired 1. _____ 2. _____

NOTE:
Due to the nature of the gaming industry you may be required to work any shift, any day of the week and may also be required to work overtime.

Do you have a valid Mississippi Gaming Permit? ___ Yes ___ No

Permit #: _____ Expiration Date: _____

How did you hear about us? _____

I am (check the following)

___ 1. A Citizen or natural of the United States

___ 2. A Lawful Permanent Resident of the United States (Alien # _____)

___ 3. An Alien authorized to work until _____ (Alien or Admission # _____)

(Alien or admission numbers must be provided if numbers 2 or 3 are checked.)

EMPLOYMENT HISTORY
(FOR PAST 10 YEARS)

List your previous work experience beginning with your most recent position. Account for periods of unemployment over 30 days. If additional space is required, please use another sheet. This application must be completed even if a resume is attached.

Company: _____
Address: _____
Dates of employment: From _____ To _____ Phone Number (____) _____ - _____
Job Title _____ Salary: _____
Reason for Leaving: _____ Supervisor _____

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Have you ever worked for Harlow's Casino Resort? ___ Yes ___ No
 Position Held: _____ Supervisor: _____
 Reason for leaving: _____
 Have you ever applied for employment with us? ___ Yes ___ No
 If yes, date applied _____
 Do you have any relatives employed with the company? ___ Yes ___ No
 If yes, please provide the following:
 Name: _____ Relationship: _____
 Position: _____

IN CASE OF EMERGENCY, PLEASE NOTIFY:

Name: _____ Relationship: _____ Phone # _____
 Address: _____
 City _____ State _____ Zip Code _____

EDUCATION

Circle last year completed: 6 7 8 9 10 11 12 College: 1 2 3 4 Graduate: 1 2 3 4
 Name of School City State Degree Received Major

Special School Attended, Training Received, or Special Job Related Skills: _____

Foreign Languages: 1. _____ Speak ___ Read ___ Write ___
 2. _____ Speak ___ Read ___ Write ___

DECLARATION OF RELEASE AND CERTIFICATION

READ BEFORE SIGNING

I certify that all information provided on this application is true, correct and complete. I understand that any false statement or omission may result in my immediate termination of employment at any time. I authorize the Company to investigate all information I have provided in this application as well as any additional information I may provide during any interviews. I authorize the Company to contact my references, my current employer and past employers, and to obtain any information it deems relevant to my employment. I also release all persons and companies from any liability relating to or arising from any information they furnish to the company. I acknowledge that if I am hired, I will be an employee at will and my employment may be terminated by me or by the Company at any time, for any or no reason. Nothing said or done by any Company representative shall constitute any employment contract to the contrary. I also acknowledge and agree to pre-employment drug testing by the Company.

Signature _____ Date _____