



Application for Employment

Ute Mountain Casino ♦ Hotel
(PO Box 268) 3 Weeminuche Drive, Towaoc CO 81334
P: 800.258.8800 / F: 970.565.6610

Please complete the requested information fully and accurately. Make sure to use blue or black ink only, print or write legibly, and date and sign the application; otherwise it may not be considered for the position. For areas that do not apply, indicate with "N/A". A resume or additional information may be attached but not as a substitute for requested information. Applications remain on file for three months. Applicants are solely responsible for updating personal/contact information. Applicants who cannot be contacted due to inaccurate information or telephone contact numbers will be excluded from consideration to any positions until corrected. Equal access to Ute Mountain Casino Hotel (UMCH) programs, services, and employment is available to all persons. Applicants needing reasonable accommodation to complete the process should notify Human Resources.

Identification

Last Name: _____ First: _____ MI: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Primary Telephone #: _____ Other #: _____

E-Mail Address: _____

Tribal Affiliation / Native American Preference

In accordance with 42 USC Sec. 2000 e2(i), UMCH exercises Tribal and Native American preference in employment in order; 1) Enrolled Ute Mountain Ute Tribal members; 2) Tribal Affiliates (documented spouse, biological children of enrolled UMUT members), enrolled Northern / Southern Ute Tribal member; 3) Other federally recognized enrolled tribal member, 4) Non Native American (without regard to race, creed, color, religion, gender, age, national origin, veteran status, disability or other legally protected status). Tribal members and affiliate applicants may be asked to provide verification of enrollment status.

Please indicate your Tribal affiliation:

- Enrolled Ute Mountain Ute Tribal Member Enrollment #: _____
- Tribal Affiliate (check one): Spouse Biological Child Southern/Northern Ute
- Member of Another Federally Recognized Tribe Name of Tribe: _____
- Not Associated with a Native American Tribe

Information

- Yes No Are you a citizen of the United States of America?
- Yes No If not a citizen, are you legally authorized to work in the USA?
- Yes No If authorized, will you be able to provide proper verification of your status?

To work at UMCH you must be: (please indicate which applies):

- At least 18 years of age to apply for a non-support position (Blue/Yellow Badge).*
- At least 21 years of age to apply for a Support / Key position (Red Badge).

* Some "Blue/Yellow" badge positions require the individual to be at least 21 years of age.

Do you have a --

- High School Diploma (you will be asked to provide a copy if selected)
- Recognized GED Certification (you will be asked to provide a copy if selected)
- Neither (Some positions do not require a HS Diploma or GED)

Yes No Do you have a valid driver's license? State of Issue: _____ #: _____

Yes No Are you able to perform the essential functions of the position(s) you seek with or without reasonable accommodations?

Yes No Have you ever plead "guilty" or "no contest" or been convicted of felony or other criminal offense within the last ten (10) years? (Except traffic offense)

Yes No Are you required to register as a Sex Offender? If yes, where: _____

Yes No Are you listed on any Sex Offender Registry? If yes, where: _____

For What Position(s) or Department Are You Applying?

Applying for any available position for which considered qualified.

Desired Positions:

1. _____
2. _____
3. _____
4. _____

Type of Employment Desired

- Full-Time (30 or more hours/wk.)
- Part-Time (less than 30 hours/wk.)
- Temporary/Seasonal

Shift Work Preference

- Any Shift
- Days Only
- Swing Only
- Graveyard Only

* Actual / alternative shift hours are dependent upon the position.

Are You Willing To Work

- Yes No Overtime As Needed
- Yes No Weekends (Thu/Fri/Sat/Sun)
- Yes No Holidays
- Yes No Variable Shifts

Have You Ever Been Employed By Ute Mountain Casino Hotel?

Yes No

If Yes - Date of Last Separation: _____

For HR Use Only



Educational Information

If You Earned a General Education Diploma (GED) – Name of the certifying program	City / State	Year Received	
High School	City / State	Years Completed	Diploma or Degree Received / Field of Study
Some College Courses (No Degree)	City / State	Years Completed	Courses of Study
College or University (Degreed)	City / State	Years Completed	Diploma or Degree Received / Field of Study
Trade or Vocational School	City / State	Years Completed	Diploma or Degree Received / Field of Study
Other Certified Specialized Training	City / State	Years Completed	Certification Received / Field of Study

U.S. Military Service

I have not served in the U.S. Armed Forces

I have served in the U.S. Armed Forces (You will be asked to provide a copy of your DD214 if selected)

Additional Contact Information

Name	Contact #	Relationship

Employment History

Begin with your **most recent** employment experience and cover at least the past 5 years. Please print. Be sure to accurately complete all requested information. Feel free to attach additional documents including a resume regarding other employment or experiences relevant to the position for which applying. However, attachments, including a resume, may not be provided as substitutes for the requested information.

Most Recent Employment:

Dates Employed: From (M/Y): To (M/Y):	Job Title:	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Self Employed <input type="checkbox"/> Other
Final Rate of Pay: \$ _____ Per	Employer / Location:	Employer Contact #:
Reason For Leaving:	Briefly described the work performed or the skills utilized (make sure to list any work or skills relevant to the position for which applying):	

Next Most Recent Employment:

Dates Employed: From (M/Y): To (M/Y):	Job Title:	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Self Employed <input type="checkbox"/> Other
Final Rate of Pay: \$ _____ Per	Employer / Location:	Employer Contact #:
Reason For Leaving:	Briefly described the work performed or the skills utilized (make sure to list any work or skills relevant to the position for which applying):	



For additional work history, you may include / attach a current resume / CV and cover letter if available.

List Other Recent Employment:

Dates Employed: From (M/Y): To (M/Y):	Job Title:
<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Self Employed <input type="checkbox"/> Other	Employer:

Dates Employed: From (M/Y): To (M/Y):	Job Title:
<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Self Employed <input type="checkbox"/> Other	Employer:

Please indicate any other work experiences, skills or training that might relate specifically to your application for this position:

Empty text box for work experiences, skills or training.

Please identify and explain any gaps in your employment history during the past 5-years, such as unemployed, student, etc. (include dates).

Empty text box for employment gaps.

Applicant's Certification and Agreement

I attest and certify that all information I have provided in order to apply for and secure work with Ute Mountain Casino Hotel (UMCH) is true and complete and made in good faith. I understand that this application form is intended for use in evaluating my qualifications for employment and the position for which I am being considered and that it is not in any context to be considered as an offer of employment. I understand that any false information, misrepresentations or omissions on this application, or other written materials as requested during my interview may lead to the rejection of my application and if employed, be cause for termination of my employment at the time any false information or omissions are discovered and that UMCH retains the right to terminate my employment on these grounds.

DO NOT SIGN UNTIL YOU HAVE CAREFULLY READ THE ABOVE APPLICANT'S CERTIFICATION

I hereby certify that I have read, fully understand and accept all terms of the foregoing Applicant's Certification.

Signature of Applicant: _____ Date: ____/____/____