



Sokaogon Gaming Enterprise Corp.

Attn: Human Resource Manager
 P.O. Box 277 Crandon, WI 54520
 Fax: 715-478-5745

Name	(Last)	(First)	(M.I.)	(Maiden Name)	(Date)
Present Address	(Street)	(City)	(State)	(Zip)	(Telephone)
Sex: Male Female	Ethnic Group:		American Indian	Asian	Black White

Are you Tribally Affiliated? _____ If so, where? _____ Please attach a copy of your tribal ID card.
 Are you either a U.S. citizen or an alien authorized to work in the United States? YES___ NO___

Social Security Number
Date of Birth (Optional)
Felony Conviction? Yes No If yes, Explain

Position Desired (be specific)
Days and hours you are available for work?
Nights? Yes No Weekends? Yes No Holidays? Yes No
Full Time _____ Part Time _____

School Attended	Name of School Location of School	Diploma or Degree Earned	Major Course of Study (Note special courses taken)
High School			
Vocational-Technical			
College or University			
Graduate or Other			

If you served in the military, which branch? _____ Dates: _____

Do you have a valid driver's license? Yes No License # _____

Do you have regular access to a car? Yes No

Do you have car insurance? Yes No What insurance company? _____

Indicate any physical limitations you may have that relate to work (i.e., lifting , standing, allergies, night vision, etc.)

Indicate your employment history below. List your most recent employer first. These employers may be contacted for a reference.

Current/ Most Recent Employer	Second Most Recent Employer	Third Most Recent Employer
Employer Name: _____ Supervisor: _____ Address: _____ _____	Employer Name: _____ Supervisor: _____ Address: _____ _____	Employer Name: _____ Supervisor: _____ Address: _____ _____
Job Title: _____ Reason for Leaving: _____	Job Title: _____ Reason for Leaving: _____	Job Title: _____ Reason for Leaving: _____
Start Date: Month: _____ Year: _____ Date Left: Month: _____ Year: _____	Start Date: Month: _____ Year: _____ Date Left: Month: _____ Year: _____	Start Date: Month: _____ Year: _____ Date Left: Month: _____ Year: _____
Pay: \$ _____ / _____ HR _____ WK _____ MO _____ YR Describe your duties. List tasks performed, tools used, machines operated.	Pay: \$ _____ / _____ HR _____ WK _____ MO _____ YR Describe your duties. List tasks performed, tools used, machines operated.	Pay: \$ _____ / _____ HR _____ WK _____ MO _____ YR Describe your duties. List tasks performed, tools used, machines operated.
_____ _____ _____	_____ _____ _____	_____ _____ _____

Note any other job-related education or training, life experiences, special skills, licenses, volunteer work, correspondence courses, etc.

REFERENCES

Please list 2 references, not related to you, whom you have known for at least 1 year.

Include name, address, and phone number.

I do hereby attest that the above information is true and correct to the best of my knowledge. I realize that any false or misleading information may disqualify me from being considered. I also authorize the potential employer to verify any of the above information. I agree to undergo a background check, including fingerprinting, prior to being hired.

Signature _____

Date _____

This Application will remain on file for one year