



LUCKY CHANCES

Casino & Fine Dining

1700 Hillside Blvd.

Colma, CA 94014

Tel: (650) 758-2237

Fax: (650) 758-6462

Email: Jobs@LuckyChances.com

PRE-EMPLOYMENT
QUESTIONNAIRE
AN EQUAL
OPPORTUNITY EMPLOYER

APPLICATION FOR EMPLOYMENT

Incomplete applications will NOT be processed

PERSONAL INFORMATION

NAME (LAST NAME, FIRST NAME, MIDDLE INITIAL)				TODAY'S DATE	
MAILING ADDRESS		APT. NO.	CITY	STATE	ZIP CODE
EMAIL ADDRESS					
ARE YOU <u>AT LEAST</u> 21 YEARS OLD? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF HIRED, CAN YOU SHOW PROOF OF LEGAL AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO		PHONE NO.	
ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING? IF NO, DESCRIBE THE FUNCTIONS THAT CANNOT BE PERFORMED:					<input type="checkbox"/> YES <input type="checkbox"/> NO

DESIRED EMPLOYMENT

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU CURRENTLY EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	
WHAT DAYS AND HOURS ARE YOU <u>AVAILABLE</u> FOR WORK?	ARE YOU AVAILABLE FOR WORK ON WEEKENDS? <input type="checkbox"/> YES <input type="checkbox"/> NO WOULD YOU BE ABLE TO WORK OVERTIME IF NECESSARY? <input type="checkbox"/> YES <input type="checkbox"/> NO	

HAVE YOU EVER WORKED AT LUCKY CHANCES BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHEN?	POSITION?
REASON FOR LEAVING		
DO YOU HAVE ANY RELATIVES CURRENTLY EMPLOYED AT LUCKY CHANCES? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE LIST HIS/HER NAME(S):		

HOW WERE YOU REFERRED TO LUCKY CHANCES?		
<input type="checkbox"/> COLMA RESIDENT	<input type="checkbox"/> ONLINE AD	<input type="checkbox"/> FRIEND
<input type="checkbox"/> WALK IN	<input type="checkbox"/> OTHER: _____	

EDUCATION, TRAINING & EXPERIENCE

SCHOOL LEVEL	NAME & LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE ?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE/BUSINESS SCHOOL				

GENERAL

DO YOU HAVE ANY OTHER EXPERIENCE, TRAINING, QUALIFICATIONS, OR SKILLS THAT YOU FEEL MAKE YOU ESPECIALLY SUITED FOR WORK AT LUCKY CHANCES, INC?

SPECIAL LICENCES OR CERTIFICATIONS:

MANY OF OUR CUSTOMERS DO NOT SPEAK ENGLISH. DO YOU SPEAK, WRITE OR UNDERSTAND ANY FOREIGN LANGUAGES? IF YES, WHAT LANGUAGES?

EMPLOYMENT HISTORY (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH MOST RECENT.)

NAME OF PRESENT OR LAST EMPLOYER		STARTING DATE	LEAVING DATE
ADDRESS		CITY	STATE ZIP
JOB TITLE	STARTING SALARY	ENDING SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SUPERVISOR		TITLE	PHONE NO.
DESCRIPTION OF WORK			
REASON FOR LEAVING			

NAME OF PREVIOUS EMPLOYER		STARTING DATE	LEAVING DATE
ADDRESS		CITY	STATE ZIP
JOB TITLE	STARTING SALARY	ENDING SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SUPERVISOR		TITLE	PHONE NO.
DESCRIPTION OF WORK			
REASON FOR LEAVING			

NAME OF PREVIOUS EMPLOYER		STARTING DATE	LEAVING DATE
ADDRESS		CITY	STATE ZIP
JOB TITLE	STARTING SALARY	ENDING SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SUPERVISOR		TITLE	PHONE NO.
DESCRIPTION OF WORK			
REASON FOR LEAVING			

REFERENCES (LIST BELOW THREE PERSONS NOT RELATED TO YOU WHO HAVE KNOWLEDGE OF YOUR WORK PERFORMANCE WITHIN THE LAST FIVE YEARS.)

NAME	ADDRESS/TELEPHONE NO.	OCCUPATION	YEARS ACQUAINTED

MILITARY SERVICE

HAVE YOU OBTAINED ANY SPECIAL SKILLS OR ABILITIES AS THE RESULT OF SERVICE IN THE MILITARY? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, PLEASE DESCRIBE.

OTHER

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE (felony or serious misdemeanor) (Convictions for misdemeanor marijuana related offenses that are more than 2 years old need not be stated). <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, STATE NATURE OF THE CRIME(S), WHEN AND WHERE CONVICTED AND DISPOSITION OF THE CASE.

AUTHORIZATION-PLEASE READ CAREFULLY AND SIGN BELOW

I HEREBY CERTIFY THAT I HAVE NOT KNOWINGLY WITHHELD ANY INFORMATION THAT MIGHT ADVERSELY AFFECT MY CHANCES FOR EMPLOYMENT AND THAT THE ANSWERS GIVEN BY ME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I FURTHER CERTIFY THAT I, THE UNDERSIGNED APPLICANT, HAVE PERSONALLY COMPLETED THIS APPLICATION. I UNDERSTAND THAT ANY OMISSION OR MISSTATEMENT OF MATERIAL FACT ON THIS APPLICATION OR ON ANY DOCUMENT USED TO SECURE EMPLOYMENT SHALL BE GROUNDS FOR REJECTION OF THIS APPLICATION OR FOR IMMEDIATE DISCHARGE IF I AM EMPLOYED, REGARDLESS OF THE TIME ELAPSED BEFORE DISCOVERY.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE AND RELEASE THE LUCKY CHANCES, INC. FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I UNDERSTAND THAT NOTHING CONTAINED IN THE APPLICATION, OR CONVEYED DURING ANY INTERVIEW WHICH MAY BE GRANTED OR DURING MY EMPLOYMENT, IF HIRED, IS INTENDED TO CREATE AN EMPLOYMENT CONTRACT BETWEEN ME AND LUCKY CHANCES, INC. IN ADDITION, I UNDERSTAND AND AGREE THAT IF I AM EMPLOYED, MY EMPLOYMENT IS FOR NO DEFINITE OR DETERMINABLE PERIOD AND MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT PRIOR NOTICE, AT THE OPTION OF EITHER MYSELF OR LUCKY CHANCES, INC.

I UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF LUCKY CHANCES, INC. HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY THE PRESIDENT OF LUCKY CHANCES, INC.

I ALSO UNDERSTAND THAT EMPLOYMENT WITH LUCKY CHANCES, INC. CANNOT COMMENCE UNTIL REFERENCES HAVE BEEN CHECKED (AT THE OPTION OF LUCKY CHANCES, INC.), THE DRUG SCREEN TESTING HAS BEEN COMPLETED AND PASSED AND THE TOWN OF COLMA HAS ISSUED AN EMPLOYEE BADGE TO ME AND I HAVE SIGNED AN "AT WILL ACKNOWLEDGEMENT/ARBITRATION AGREEMENT."

APPLICANT SIGNATURE

DATE



LUCKY CHANCES, INC.
Authorization to Check All References

I hereby authorize Lucky Chances, Inc. to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to Lucky Chances, Inc. any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Lucky Chances, Inc. from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I have read and understand this agreement.

Applicant Signature

Date

Print Name

Date



LUCKY CHANCES, INC. EEO Policy Statement and EEO Data

Dear Applicant,

Completion of this form is entirely voluntary, and all information will remain confidential and will not affect your application for employment. We are required by law to collect this information for equal opportunity purposes, and it will not become of your personnel record if you are hired by Lucky Chances, Inc.

Lucky Chances, Inc. provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, marital status amnesty, or status as a covered veteran in accordance with applicable federal, state and local laws. Lucky Chances, Inc. complies with applicable state and local laws governing non-discrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including, but not limited to, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training.

Lucky Chances, Inc. expressly prohibits any form of unlawful employee harassment based on race, color, religion, gender, sexual orientation, national origin, age, disability, or veteran status. Improper interference with the ability to Lucky Chances, Inc. employees to perform their expected job duties is absolutely not tolerated.

Name _____ Date _____

Position you are applying for _____

Gender: Male Female

Race/Ethnicity: Hispanic or Latino
 White (not Hispanic or Latino)
 Black or African American (not Hispanic or Latino)
 Native Hawaiian or Other Pacific Islander (not Hispanic or Latino)
 Asian (not Hispanic or Latino)
 American Indian or Alaska Native (not Hispanic or Latino)
 Two or More Races (Not Hispanic or Latino)

To Be Completed by Employer:

EEO-1 Category: (1.1) Executive/Senior Level Officials & Managers
 (1.2) First/Mid Level Officials & Managers
 (2) Professionals
 (3) Technicians
 (4) Sales Workers
 (5) Administrative Support Workers
 (6) Craft Workers
 (7) Operatives
 (8) Laborers & Helpers
 (9) Service Workers