



# HORIZON'S EDGE CASINO CRUISES

## APPLICATION FOR EMPLOYMENT

Horizon's Edge Casino Cruises and its subsidiaries consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. Horizon's Edge Casino Cruises is an equal opportunity employer. All applicants may be subject to pre-employment drug testing and Coast Guard examination.

### PLEASE READ CAREFULLY - PRINT CLEARLY - ANSWER ALL QUESTIONS

THE QUESTIONS ON THIS FORM ARE ASKED TO ALLOW US TO THOROUGHLY EVALUATE YOUR ABILITY AND CHANGE FOR SUCCESS IN THE POSITION FOR WHICH YOU ARE APPLYING. EVERY EFFORT HAS BEEN MADE TO COMPLY WITH APPLICABLE FEDERAL AND STATE LAWS.

Position(s) Applied For \_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

Referral Source:  Advertisement  Employee  Relative  Government Employment Agency  
 Walk-in  Private Employment Agency  Other \_\_\_\_\_  
Name of Source (If Applicable) \_\_\_\_\_

### PERSONAL DATA

Social Security Number \_\_\_\_\_

Name \_\_\_\_\_  
(last) (first) (middle)

Indicate any other name by which you have been known \_\_\_\_\_

Please provide 5 year residence history beginning with your present address:

\_\_\_\_\_  
(#/street) (city) (country) (state) (zip code)  
\_\_\_\_\_  
(#/street) (city) (country) (state) (zip code)  
\_\_\_\_\_  
(#/street) (city) (country) (state) (zip code)  
\_\_\_\_\_  
(#/street) (city) (country) (state) (zip code)

Home Phone # ( ) - Alternate Phone#: ( ) -

Have you ever been employed by Horizon's Edge Casino Cruises?

Yes  No If yes, where? \_\_\_\_\_ when? \_\_\_\_\_

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

Do you have any relatives currently employed by Horizon's Edge or any other Horizon's Edge subsidiary?  Yes  No

If yes, who? \_\_\_\_\_ where? \_\_\_\_\_

Are you below the age of 18?  Yes  No If yes, can you furnish a work permit  Yes  No

Have you, since the age of 18, even been convicted of a felony?  Yes  No

If yes, explain \_\_\_\_\_

NOTE: A conviction will not necessarily bar you from employment. Each conviction will be judged on its own merits with respect to time, circumstances, and seriousness

Are you authorized to work in the United States?

Yes  No (Proof of citizenship or immigration status will be required upon employment.)

## EDUCATION & TRAINING

	Name and Address Of School	Major/ Minor	Did You Graduate?	# of Creadits Earned	Diploma/ Degree
High School					
Undergraduate College					
Graduate/ Professional					
Other (Specify)					
Additional Training	Description	Degree/certificate/License		Date Completed	

## MILITARY HISTORY

Have you ever served in the United States Armed Services or in a state Militia?  Yes  No

If yes, complete the following:

Service Branch \_\_\_\_\_ Reserve Organization \_\_\_\_\_

Final Rank or Rate \_\_\_\_\_

Describe any training in your military experience that is relevant to the position for which you are applying

## SPECIFIC SKILLS

Indicate experience you may have in any of the following skill areas pertinent to the position for which you are applying.

- |  |  |
|--|--|
| <input type="checkbox"/> Shorthand WPM             | <input type="checkbox"/> Fax Machine       |
| <input type="checkbox"/> Typing WPM                | <input type="checkbox"/> PC                |
| <input type="checkbox"/> Data Entry Keystrokes     | <input type="checkbox"/> PBX / Switchboard |
| <input type="checkbox"/> Data Processing/Computers |  |

### SOFTWARE:

- Lotus 123  IBM Displaywrite  Wordperfect  Dbase III Plus

OTHER: Other skills or qualifications relevant to the position being applied for (software, hardware, foreign language, etc.)

Drivers License Number (if required by job) State \_\_\_\_\_ Number \_\_\_\_\_

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a responsible manner or with reasonable accommodations the essential functions of the job or occupation for which you have applied? If applicable a description of the essential functions of such a job or occupation is attached  Yes  No

## ACTIVITIES

List any hobbies or interests that you have, or any clubs, organizations, or professional groups to which you belong that have a direct bearing on your qualification for the position for which you are applying.

## WORK PREFERENCE

Are you currently employed?  Yes  No

May we contact your current employer?  Yes  No

Are you currently on "lay off" status subject to recall?  Yes  No

Will you accept  full-time work  part time work  temporary work?  
 if No, days you are available to work \_\_\_\_\_

Will you accept  1st shift  2nd shift  3rd shift \_\_\_\_\_

On what date would you be available to begin work? \_\_\_\_\_

Are you willing to relocate  Yes  No

Can you travel if your job requires it?  Yes  No If yes, what % \_\_\_\_\_

## EMPLOYMENT HISTORY

List your five(5) employers, assignments, or volunteer activities, starting with the most recent, Including military experience. Explain any gaps in employment in comments section below. indicate your activities during that time as well as the name, address, and telephone number of a reference (not a relative) who can verify your activities.

Employer	Telephone (      )	Date Employed From	To	Summarize the nature of the work performed and the job responsibilities
Address				
Job Title		Hourly Rate/Salary Ending		
Immediate Supervisor and Title		\$	Per	
Reason For Leaving		Hourly Rate/Salary Ending		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
Employer	Telephone (      )	Date Employed From	To	Summarize the nature of the work performed and the job responsibilities
Address				
Job Title		Hourly Rate/Salary Ending		
Immediate Supervisor and Title		\$	Per	
Reason For Leaving		Hourly Rate/Salary Ending		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
Employer	Telephone (      )	Date Employed From	To	Summarize the nature of the work performed and the job responsibilities
Address				
Job Title		Hourly Rate/Salary Ending		
Immediate Supervisor and Title		\$	Per	
Reason For Leaving		Hourly Rate/Salary Ending		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
Employer	Telephone (      )	Date Employed From	To	Summarize the nature of the work performed and the job responsibilities
Address				
Job Title		Hourly Rate/Salary Ending		
Immediate Supervisor and Title		\$	Per	
Reason For Leaving		Hourly Rate/Salary Ending		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
Employer	Telephone (      )	Date Employed From	To	Summarize the nature of the work performed and the job responsibilities
Address				
Job Title		Hourly Rate/Salary Ending		
Immediate Supervisor and Title		\$	Per	
Reason For Leaving		Hourly Rate/Salary Ending		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	

## REFERENCES

List names of persons not related to you whom we may contact to verify your qualifications for the job for which you are applying:

Name & Nature of Affiliation	Address	Occupation & Company	Telephone #

Provide any additional information you feel may be helpful to us in considering your application.

---

---

## CERTIFICATION OF ACCURACY AND AUTHORIZATION FOR THE RELEASE OF INFORMATION

I certify that the information I have provided is true, correct, and complete in all material respects. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in termination. I also understand that I am required to abide by all rules and regulations of Horizon's Edge Casino Cruises, Inc. and its subsidiaries.

In connection with my application for employment with Horizon's Edge Casino Cruises, I hereby authorize Horizon's Edge Casino Cruises and any of its officers, agents, employees, and servants to solicit all relevant information with regard to this application. This authorization includes, but is not limited to, matters of opinion relating to my character, ability, reputation, credit history, and past conduct. I understand that such information will be used by Horizon's Edge Casino Cruises in making its decision regarding my employment.

I hereby authorize and request all persons, schools, companies, corporations, governmental units, credit bureaus, law enforcement agencies to release such requested information to Horizon's Edge Casino Cruises and its agents without restriction or qualification. I voluntarily waive all recourse and release all such providers of said information from liability for complying with this authorization.

I hereby release and discharge Horizon's Edge Casino Cruises, its agents and servants, their respective parents, subsidiaries, affiliates, successors and assigns, and their respective shareholders, officers, directors, employees, former employees, agents, contractors, and attorneys from any claim or liability, including attorney's fees, relating to or arising out of, but not limited to, the performance of the pre-employment investigation, the ultimate employment determination, and the disclosure of the information as described herein and as required bylaw, and any termination of my employment because of the falsity, answers or omissions, made by me in this application.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Horizon's Edge Casino Cruises is of an "at will" nature, which means that Horizon's Edge Casino Cruises may discharge me at any time with or without cause, and with or without notice, except to the extent my employment may be covered by a Collective Bargaining Agreement. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of Horizon's Edge Casino Cruises.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_