



# Inn of the Mountain Gods Resort & Casino Enterprises

**Non - Gaming Team Member**

All applicants applying for employment at Inn of the Mountain Gods Resort Enterprises must undergo a background check with the Mescalero Apache Tribal Gaming Commission (MATGC).

- ◆ The attached four-page application must be filled out completely and returned to the Gaming Commission office (Attach additional sheets if necessary).
- ◆ The Authorization for Release of Information must NOT be signed until applicant is in the presence of a Notary Public.
- ◆ Applicant must bring two valid forms of identification with application. Any two of the following will be accepted (A birth certificate is not an acceptable form of identification):
  - \* State Issued Drivers License
  - \* Tribal ID
  - \* Resident Alien Card
  - \* State Issued ID
  - \* Passport
  - \* School ID
  - \* Social Security Card
  - \* Military ID
  - \* Voters Registration Card

If you have any questions, please call 464 – 7100, select option three (3) for the Licensing Department.

### PRIVACY ACT NOTICE

In compliance with the Privacy Act Notice of 1974, the following information is provided: Solicitation of the information on this form is authorized by 25 U.S.C. 2701 *et. seq.* The purpose of the requested information is to determine the eligibility of individuals to be employed with Inn of the Mountain Gods Enterprise. The information will be used by Inn of the Mountain Gods Enterprise who has need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, Tribal, State, local, or foreign law enforcement and regulatory agencies when relevant to a civil, criminal, or regulatory investigations or prosecutions. Failure to consent to the disclosures indicated in this notice will result in a tribe's being unable to hire you. The disclosure of your Social Security Number (SSN) is voluntary. However, failure to supply a SSN may result in errors in processing your application.

### FALSE STATEMENT NOTICE

A false statement on any part of your application may be grounds for not hiring you or firing you after you begin work.

I \_\_\_\_\_ have read the information above. By signing below, I am in agreement with the above Notices.

Applicant's Name (Please Print clearly)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

FULL LEGAL NAME (LAST) (FIRST) (MIDDLE)

OTHER NAMES USED BY OR KNOWN BY (INCLUDE MAIDEN NAME)

CURRENT STREET ADDRESS CITY STATE ZIP

CURRENT MAILING ADDRESS CITY STATE ZIP

HOME PHONE (Including area code) BUSINESS PHONE (Including area code) CITIZENSHIP USA   OTHER (List) \_\_\_\_\_

POSITION APPLIED FOR SOCIAL SECURITY NUMBER DATE OF BIRTH MONTH/DAY/YEAR

PLACE OF BIRTH CITY STATE COUNTY COUNTRY ARE YOU AN ENROLLED MEMBER OF THE MESCALERO APACHE TRIBE?  YES  NO Census # \_\_\_\_\_

ARE YOU AN ENROLLED MEMBER OF ANY FEDERALLY RECOGNIZED INDIAN TRIBE, OTHER THAN THE MESCALERO APACHE? YES  NO  IF YES: TRIBE CITY STATE CENSUS#

MILITARY SERVICE (Attach a copy of your DD 214) DATE(S) BRANCH OF SERVICE RANK TYPE OF DISCHARGE WHILE IN THE MILITARY, WERE YOU EVER CHARGED WITH AN OFFENSE THAT RESULTED IN SPECIAL OR GENERAL COURT MARSHALL? YES  NO  IF YES, ATTACH DOCUMENTS

PLEASE LIST ANY IMMEDIATE FAMILY MEMBERS (Spouse, Parents, Grandparents, Children and Siblings) WHO WORK FOR THE INN OF THE MOUNTAIN GODS RESORT & CASINO.

Name	Relationship	Position	Department
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

CURRENT AND 10 YEAR DRIVERS LICENSE HISTORY (Please list state and DL #'s)

RESIDENTIAL HISTORY (List from most current / Attach additional sheet if necessary) Address, City, State and Zip From To From To

WITH IN THE PAST THREE YEARS HAVE YOU EVER BEEN ARRESTED, CHARGED OR INDICTED FOR A MISDEMEANOR OR FELONY (OTHER THAN MINOR TRAFFIC VIOLATIONS) INCLUDING RECKLESS DRIVING, CARELESS DRIVING or DUI/ DWI?

ARE YOU NOW THE SUBJECT OF A CRIMINAL INVESTIGATION? YES NO  
IF YES, PROVIDE THE FOLLOWING INFORMATION FOR EACH INSTANCE (Attach additional sheet if necessary).

Charge: \_\_\_\_\_  
Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Court, City and State \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

Charge: \_\_\_\_\_  
Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Court, City and State \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

Charge: \_\_\_\_\_  
Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Court, City and State \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

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Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Court, City and State \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

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Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Court, City and State \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

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Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Court, City and State \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

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Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

Charge: \_\_\_\_\_  
Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Court, City and State \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

Charge: \_\_\_\_\_  
Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Court, City and State \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

Charge: \_\_\_\_\_  
Type of Charge (Misdemeanor or Felony): \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Court, City and State \_\_\_\_\_  
Disposition (Outcome) \_\_\_\_\_

**AUTHORIZATION FOR RELEASE OF INFORMATION**

I, \_\_\_\_\_, hereby authorize the release, to the Mescalero Apache Tribal Gaming Commission (MATGC), any information requested in order to determine my suitability for employment with the Inn of the Mountain Gods Resort Enterprise

This document authorizes release of requested information whether or not such information would be otherwise protected from disclosure by any constitutional, statutory or common law privilege.

I agree to accept any risk of adverse public notice, embarrassment, criticism or financial loss that may result from use of information that is obtained in connection with a background investigation for the purpose listed in the first paragraph of this document.

I authorize the release of any information related to my activities including, but not limited to: criminal justice agencies, regulatory agencies.

I authorize the Mescalero Apache Tribal Gaming Commission and Inn of the Mountain Gods Resort Enterprise to review and copy all documents as deemed appropriate.

I relinquish any right that I may have to pursue a cause of action against any person (or his or her agent) to whom this request is presented when such cause of action arises out of a response to a request for information pursuant to the Indian Regulatory Act of 1988 (25 U.S.C. section 2701 *et seq.*). I further agree to indemnify and hold harmless any person to whom this request is lawfully presented. Such indemnification and hold harmless includes all claims, damages, losses and expenses, including reasonable attorneys' fees.

A reproduction of this authorization is the same as the original.

Executed on this \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Applicants Signature

**SECTION BELOW TO BE COMPLETED BY A NOTARY**

State of New Mexico  
County of Otero

This instrument was acknowledged before me on \_\_\_\_\_ by

\_\_\_\_\_ .

\_\_\_\_\_  
Notary  
My Commission Expires \_\_\_\_\_