

Black Diamond Capital, LLC

Equal opportunity employer. Applicants are considered for employment without regard to sex, marital status, race, color, religion, creed, national origin, age, physical or mental disability.

Salary desired _____ Job applied for _____

Your application is a permanent part of your record.

| | | | |
|------------------------|------------|------------------|--------------------------|
| Last Name | First Name | Middle Initial | Social Security Number |
| Street Address/P O Box | City | State | Zip |
| | | Telephone Number | Message Telephone Number |

Are you a United States Citizen? Yes No

U.S. MILITARY SERVICE
 Branch of Service: _____ From: _____ To: _____
 Duty & Training while in service: _____

If no, Alien Registration # _____

Are you looking for a full-time position? _____ Part-time position? _____ Temporary position? _____

Do you prefer to work? Days? _____ Evenings? _____ Nights? _____ Weekends? _____

South Dakota Gaming License { } Yes { } No **If yes, License #** _____

Please Circle: If necessary for the job, are you over? 18 21 25 If necessary for the job, can you lift? 15 25 50+ lbs

EMPLOYMENT HISTORY-List your recent position first. (Please do not "refer to resume.")

| | | | |
|--------------------|---|----------------|--|
| Employer | | Work Performed | |
| Address | | Telephone | |
| Job Title | Dates From: To: | | |
| Supervisor | May we contact this employer? { } Yes { } No | | |
| Reason for leaving | | | |
| Employer | | Work Performed | |
| Address | | Telephone | |
| Job Title | Dates From: To: | | |
| Supervisor | May we contact this employer? { } Yes { } No | | |
| Reason for leaving | | | |
| Employer | | Work Performed | |
| Address | | Telephone | |
| Job Title | Dates From: To: | | |
| Supervisor | May we contact this employer? { } Yes { } No | | |
| Reason for leaving | | | |

SKILLS

Summarize special skills, qualification and equipment used _____

Transportation to job? Yes No Driver's License Number: _____ State/Type _____

EDUCATION

| | High School | | | | | College/University | | | | Graduate/Professional | | | | Major |
|-----------------------------------|-------------|----|----|----|-----|--------------------|---|---|---|-----------------------|---|---|---|-------|
| Years Completed | 9 | 10 | 11 | 12 | GED | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | |
| Diploma/Degree/Certificate | | | | | | | | | | | | | | |
| Other Education/Training | | | | | | | | | | | | | | |

PERSONAL/PROFESSIONAL REFERENCES

List three references other than relatives:

| Name | Address | Telephone Number | Occupation | Length of Acquaintance |
|------|---------|------------------|------------|------------------------|
| | | | | |
| | | | | |
| | | | | |

OTHER

Additional comments you feel would assist us in evaluating your qualifications:

Are you willing to relocate? _____

APPLICANT STATEMENT

I verify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview (s) may result in discharge.

Necessary for employment in a specific position, you may be required to have a physical examination, drug screen, to provide evidence of citizenship or date of birth, or to sign a conflict of interest agreement and abide by its terms.

Signature of applicant Date

EMPLOYER SECTIONS: _____

