

MEC OREGON RACING, INC.



Portland Meadows
1001 N. Schmeer Road
Portland, OR 97217
503-285-9144

APPLICATION FOR EMPLOYMENT

ALL POSITIONS ARE SUBJECT TO PART-TIME EMPLOYMENT

Individuals who need accommodation during the application process should advise the Payroll Department so arrangements can be made. This company makes its employment decisions without regard to race, color, sex, national origin, religion, marital status, age, prior industrial injury, mental or physical disability unrelated to job performance, or any other protected classification. This company does not hire applicants who must smoke while on the job.

PERSONAL INFORMATION (Please print or type)

Social Security Number: _____ - _____ - _____

Name Last: _____ First _____ Middle _____

Present Address: _____

Phone Number: (____) _____ Street City State Zip
Cell Phone: (____) _____

Permanent Address: _____

Are you 18 years of age or older? Yes No

List the name(s) and department(s) of any relatives already employed by this company: _____
(MEC does not discriminate against applicants or employees because a relative works for MEC.)

Referred by: _____

This application will be considered only for the specific job applied for. It will not be retained. If you desire to be considered for a position at a future time, you must file a new application.

Position(s) applied for: _____

Have you ever been convicted of any crime other than traffic violations? Yes No
If yes, please list all convictions (Note, a conviction record will not necessarily bar you from employment.)

In case of emergency, please notify: _____

Address: _____ Phone: (____) _____

PREVIOUS WORK EXPERIENCE *Please list most recent employment first.*

LIST ALL JOBS YOU HAVE HELD IN THE LAST FIVE YEARS attach additional page(s) as necessary

Company Name: _____ Telephone Number: (____) _____

Company Address: _____ Date of Hire: _____

Immediate Supervisor: _____ Last Date worked: _____

Position held: _____ Latest Salary: _____

Job Responsibilities, Equipment Operated: _____

Reason for leaving: _____

Company Name: _____ Telephone Number: (____) _____

Company Address: _____ Date of Hire: _____

Immediate Supervisor: _____ Last Date worked: _____

Position held: _____ Latest Salary: _____

Job Responsibilities, Equipment Operated: _____

Reason for leaving: _____

Have you ever worked for MEC? Yes No If yes, when? What Position?

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REFERENCES Give below the names of two persons not related to you, whom you have known at least one year.

Name (print)	Address			Nature of Acquaintance	Years
1.	City State Phone				
2.	City State Phone				
EDUCATION	Name of School	Circle Last Year Completed	Did You Graduate?	Degree Received	
High School		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
College		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Trade, Business or Correspondence School		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Subjects of special study or research work:					
Do you have any special business talents not listed above? If so, please describe					

MEC Oregon Racing never has and does not now **REQUIRE** the endorsement or recommendation of anyone elected to political office. All employees are required to be licensed by the Oregon Racing Commission (ORC). The ORC licensing process will include a background check. **IF EMPLOYED AS A MUTUEL CLERK, LOTTERY CLERK OR ANY OTHER POSITION WHICH REQUIRES HANDLING CASH, I AGREE TO PAY ALL SHORTAGES FOR WHICH I AM RESPONSIBLE.**

It is the company's policy to comply with the provisions of the Immigration Reform and Control Act of 1986 and to hire only authorized workers. If you are hired, you will be asked to provide verification of your work eligibility. The type of verification required may change from time to time as federal regulations are promulgated or amended. Your employment will not be continued if you are unable or unwilling to provide the verification requested by the company.

In submitting this application for employment, I authorize investigation of all statements contained in it, and I agree to cooperate and assist in such investigation. I authorize any person, school, current employer, past employer(s), and organizations named in this application form, and the accompanying resume, if any, and any other person or entity with knowledge of me to provide MEC with any information and opinion which MEC regards as useful to it in making a hiring decision, and I release from any and all legal liability and agree to hold harmless MEC and such persons and organizations in making such statements or furnishing or receiving any and all information which MEC may seek. I understand and agree that MEC's inquiry may include an investigative consumer report concerning information on character, credit, general reputation, personal characteristics, and mode of living. Signing this form represents Authorization to Obtain Personal Information.

I am physically fit to do the position for which I have applied with or without reasonable accommodations. If accommodations are required I will advise my supervisor immediately. I understand and agree that as part of the application process I may be required to undergo written tests, interviews and a drug screening examination for illegal drugs and I consent to such tests, interviews and examination. I also understand and agree that I may be required to undergo a post offer medical examination at MEC's expense to determine whether I can perform the essential functions of the job with or without accommodation, and that any job offer may be conditioned on the satisfactory completion of such examination.

If hired, I will comply with all MEC rules, regulations, policies, procedures and instructions, including any and all attendance and job performance requirements and testing for illegal drugs and alcohol. I understand that nothing in this Employment Application creates or implies a contract between MEC and myself for employment or any other benefit. No promise regarding employment has been made to me and I understand that no such promise is binding upon MEC. I understand and agree that if any employment relationship is established, my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either MEC or myself, subject only to any applicable collective bargaining agreement. I understand that no representative of MEC, except the president of MEC, by written agreement only, has any authority to enter into any agreement for any specified time, or to make any agreement contrary to the foregoing.

I certify and acknowledge that I have read and understand all of this application and that the information I have provided above is true and complete. I understand and agree that any misleading or false statement and/or omission(s) may render this application void and lead to immediate dismissal in the event of employment.

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED

Signature _____

Date: _____