**Stable Employee 2020**

In order to qualify an applicant must earn 75% of their income from their licensed position at Mountaineer Casino Racetrack and Resort during the live racing meet, be listed on a Trainer’s Badge List and complete the Affidavit of Earnings section and provide:

* + Two cancelled checks for the period in which you are seeking benefits. If you do not have cancelled checks more than two Trustees must sign off and acknowledge that the applicant works on the backstretch on a daily basis.

**Affidavit of Earnings**

This affidavit will verify that I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ employ and provide

 (trainer)

compensation to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 (employee)

This employee is paid on a weekly, monthly, daily (circle one) basis and earns $\_\_\_\_\_ each pay period.

The applicant began working for me on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 (hire date)

The applicant is on my badge list and is paid by check or cash (circle one).

Two cancelled checks must be provided for the period they are requesting benefits.

If an employee is not paid by check, two or more trustees are require to verify employment and the following statement must be acknowledged by the trainer:

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ verify that this applicant is employed by me and is paid in cash. I acknowledge that any false or misleading statements will result in loss of current and future benefits from the Mountaineer Park HBPA Medical Trust for me and my employees.

Trainer’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_