



APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE THE ENTIRE APPLICATION BY PRINTING OR WRITING LEGIBLY IN INK.

Date of Application: _____ Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different than above): _____

Home Phone: _____ Work Phone: _____ Email: _____

Position Desired: _____ Salary Desired: _____

Date Available for Employment: _____

Previously Employed at Sleeping Lady? _____ Dates of Previous Employment _____

Position Held: _____

Are you related to anyone presently employed at Sleeping Lady? No Yes Name: _____

Were you referred by a present employee of Sleeping Lady? No Yes Name: _____

ELIGIBILITY: Are you eligible to work in the United States? _____

Do you have a valid driver's license? _____ Are you a non-smoker? _____

Have you every been convicted of a felony? _____(yes) _____(no) If yes, please explain below:

Sleeping Lady reserves the right to test employees for the presence of drugs or alcohol on the basis of a pre-employment screening and/or a random sampling of employees.

SLEEPING LADY IS A NON-SMOKING FACILITY.
NO SMOKING IS PERMITTED IN ANY OF THE BUILDINGS OR ON THE GROUNDS.
My initials indicate that I have read and understand the above stated smoking policy. _____
(Initial)

EMPLOYMENT HISTORY

1. Name of Company: _____ Position Held: _____
Type of Business: _____ Phone: _____ Supervisor's Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Dates Employed: _____ to _____ Salary: _____
Brief Description of Duties: _____
Reason for Leaving: _____
If present employer, may we contact? _____

2. Name of Company: _____ Position Held: _____
Type of Business: _____ Phone: _____ Supervisor's Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Dates Employed: _____ to _____ Salary: _____
Brief Description of Duties: _____
Reason for Leaving: _____

3. Name of Company: _____ Position Held: _____
Type of Business: _____ Phone: _____ Supervisor's Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Dates Employed: _____ to _____ Salary: _____
Brief Description of Duties: _____
Reason for Leaving: _____

4. Name of Company: _____ Position Held: _____
Type of Business: _____ Phone: _____ Supervisor's Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Dates Employed: _____ to _____ Salary: _____
Brief Description of Duties: _____
Reason for Leaving: _____

EDUCATIONAL HISTORY

Name Location Major Course/Subject Graduate (yes/no)

High School: _____

Technical: _____

Trade School: _____

College: _____

College: _____

Other Education: _____

Training: _____

LIST ANY ADDITIONAL EDUCATION OR TRAINING ON SEPARATE SHEET IF NECESSARY

Other Activities (professional memberships, certificates, licenses, etc.):

Past and present civic or cultural activities:

Recreational interests:

PROFESSIONAL / WORK REFERENCES

List at least two supervisors and one person who have knowledge of your qualifications for the position for which you are applying. Please indicate if references can be contacted as soon as we receive your application.

1. Name: _____ Address: _____

Current Phone Number: () _____ Title/Relationship: _____

Occupation / Business: _____ Length of acquaintance? _____

2. Name: _____ Address: _____

Current Phone Number: () _____ Title/Relationship: _____

Occupation / Business: _____ Length of acquaintance? _____

3. Name: _____ Address: _____
Current Phone Number: ____ (____) _____ Title/Relationship: _____
Occupation / Business: _____ Length of acquaintance? _____

4. Name: _____ Address: _____
Current Phone Number: ____ (____) _____ Title/Relationship: _____
Occupation / Business: _____ Length of acquaintance? _____

Sleeping Lady believes that all persons are entitled to equal employment opportunity and does not discriminate against its employees or applicants because of race, ethnicity, religion, gender, national origin, citizenship, marital status, veteran status, age, physical disability, use of a trained guide dog or service animal, sexual orientation or any other consideration made unlawful by applicable federal, state or local laws. Equal employment opportunity will be extended to all persons in all aspects of the employer-employee relationship, including recruitment, hiring, upgrading, training, promotion, transfer, discipline, layoff, recall and termination.

Sleeping Lady strictly prohibits illegal harassment including sexual, racial and ethnic. Employees who violate this policy are subject to discipline, up to and including possible termination.

I hereby certify that the answers and other information on this application are true and correct and that I understand any misrepresentation or omission of facts on my part will be justification for separation from the company's service if employed. I understand that my employment may be contingent upon receipt of any alien registration number, verification of birth, Social Security number and other pertinent information bearing upon my employment. I understand that my employment with Sleeping Lady is at-will, which means that either I or Sleeping Lady may terminate the employment relationship at any time with or without reason. I further understand that my employment will not be terminated for any unlawful reason which constitutes discrimination on the basis of race, color, religion, sex, national origin, age, citizenship, disability, marital status, and medical conditions.

Signature of Applicant

Date Signed

Mail application to:

**Sleeping Lady
7375 Icicle Road
Leavenworth, WA 98826
(509)548-6344
Or fax to: (509)548-5564
Attention: Deborah Hartl, Human Resource Director**