



## 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: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Position Desired: \_\_\_\_\_ Salary Desired: \_\_\_\_\_  
Date Available for Employment: \_\_\_\_\_ Previously Employed at Sleeping Lady? \_\_\_\_ (yes) \_\_\_\_ (no)

Dates of Previous Employment: \_\_\_\_\_ Position Held: \_\_\_\_\_

Are you related to anyone presently employed at Sleeping Lady? \_\_\_\_ (yes) \_\_\_\_ (no) Name: \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_ (yes) \_\_\_\_ (no)

Are you a non-smoker (including cigarettes, e-cigs, vape, etc.)? \_\_\_\_ (yes) \_\_\_\_ (no)

**ELIGIBILITY:** Are you eligible to work in the United States? \_\_\_\_ (yes) \_\_\_\_ (no)

Note: Sleeping Lady participates in E-Verify and the Social Security Number Verification Service (SSNVS). If hired, we will confirm your eligibility to legally work in the United States. Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.

Have you ever been convicted of a felony? \_\_\_\_ (yes) \_\_\_\_ (no) If yes, please explain below:  
\_\_\_\_\_ Date(s) of conviction: \_\_\_\_\_

Pursuant to the Child/Adult Abuse Information Act, the Revised Code of Washington (RCW) 43.43.830 – 43.43.845 allows employers to conduct pre-employment background checks. Have you ever been convicted of a crime against children or other persons, criminal dependency proceedings, abuse of vulnerable adults, or DOL disciplinary board final decisions and any subsequent criminal charges associated with the conduct that is the subject of the disciplinary board final decision? \_\_\_\_ (yes) \_\_\_\_ (no)

If yes, please explain: \_\_\_\_\_

**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)

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

## 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**

| <u>Name</u>      | <u>Location</u> | <u>Major Course/Subject</u> | <u>Graduate (yes/no)</u> |
|------------------|-----------------|-----------------------------|--------------------------|
| 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**