Application for Employment

Sleeping Fawn Resort is an equal opportunity employer. It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. Submit completed application via email to: sleepingfawnresort@gmail.com

Position(s)	Date you can start work:												
PERSON	AL DATA	1											
Name (last, first, middle)													
Street Addre	ess and/or Ma	iling Addres	s			City		State Zip Do you have a High School Diploma or GED?					
Phone Number				Wage Desired		/	/ hr		Do you have a High School Diploma or GED? Yes No				
Email Addre	ess:			1				Are you under the age of 18? Yes No				3?	
POSITIO	ON INFOF	RMATIO	N										
Availability (vailability (Indicate times available for each day of the week. For example 9:00AM - 3:30PM):												
	Mond	ay	Tuesday	Wednesday	Thu	sday	Friday	y	Saturday		Sunday		
FROM													
ТО													
Have you been told the essential functions of the job or have you viewed a copy of the job description listing the essential functions of the job?													
Yes No Can you perform the essential functions of the job with or without reasonable accommodation? Yes No													
QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work. (schools, colleges, degrees, vocational or technical programs, military training, etc.)													
			Name			Degree				Address/City/State			
School													
School / Othe	er												
Other													
SPECIAI	L SKILLS	List any sp	pecial skills or exper	ience that you feel	would help	you in the	position that	t you are ap	oplying f	or. (leadersh	ip, organizati	ions/teams, etc.)	
REFERENCES Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.													
Name			Address/City/State						Ph	one	R	elationship	

WORK HISTORY Start with your present or most recent employ	ment and work b	ack. Use separate sheet if necessary.	(INCLUDE PAID AND UNPAID POSITIONS)						
Job Title #1	Start Date (mo/	day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's Na	ame	Phone Number						
City	State		Zip						
Duties:									
Reason for Leaving		Starting Wage	Ending Wage						
May we contact your present employer?	Yes	No N/A							
Job Title #2	Start Date (mo/	day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's Na	ame	Phone Number						
City	State		Zip						
Duties:									
Reason for Leaving		Starting Wage	Ending Wage						
Job Title #3	Start Date (mo/	day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's Na	ame	Phone Number						
City	State		Zip						
Duties:									
Reason for Leaving		Starting Wage	Ending Wage						
Job Title #4	Start Date (mo/	day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's Na	ame	Phone Number						
City	State		Zip						
Duties:	1								
Reason for Leaving		Starting Wage	Ending Wage						
I certify that the facts set forth in this Application for Employm	ent are true and o	complete to the best of my knowledg	e. I understand that if I am employed, false						

statements, omissions or misrepresentations may result in my dismissal. I authorize Sleeping Fawn Resort to make an investigation of any of the facts set forth in this application and release Sleeping Fawn Resort from any liability. Sleeping Fawn Resort may contact any listed references on this application.

I acknowledge and understand that Sleeping Fawn Resort is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.