

An equal opportunity employer

## 2014 EMPLOYMENT APPLICATION

**NOTE:** This application is valid for 30 days. If you wish to be considered for employment after this 30-day period, a new application must be completed.

It is the policy of Midwest Mattress not to discriminate in hiring and employment on the basis of race, color, religion, national origin, sex, disability, age or other protected class as provided by all applicable state and federal laws. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. If you provide false or misleading information during the application process or during your employment with Midwest Mattress this may result in disciplinary action including up to termination of employment or a decision to not consider you further for employment. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

DOONAL INFORMATION

PERSUNAL I	NFURWIATION			
Name		Date of Application		
SS# (Optional)		Phone Number		
Present Address		<del> </del>		
	Street	City	State Zip Code	
Mailing Address	<u> </u>	G':	7. 0.1	
(If different)	Street	City	State Zip Code	
In case of an emer	gency, please notify:Name	Relationship	Phone Number	
Ara vou lagally ali	gible for employment in the U.S.? (Proo	_		
Are you at least 18	By years of age? (Proof of eligibility will be	e required)	Yes No	
Have you ever plead guilty to; or been convicted of a crime other than minor traffic violations such as parking ticketsetc.? (If yes, please explain)  Yes No				
EMPLOYME	NT DESIRED			
Position desired _		Full Time	_ Part Time	
When are you ava	ilable to start?	Salary Requirement		
·		Weekends		
		If unemployed, how long?		
Have you ever applied to Midwest Mattress before? Yes No				
		E1	A 4	
_	erred to Midwest Mattress?		ency Advertisement	
School	Internal Posting Friend	Recruiter	Walk-in Other	

<b>EDUCATION</b>				
	Name & Location of School	Course of Study	# of Years Completed	Degree/Diploma
High School				
Trade, Business, or Technical				
College				
Graduate				
applying: e.g., add licensing, apprentic	other education, certification of itional education or course workeships, professional organizations and memberships vorotected status).	rk, seminars or workshops, ons, publications, other exp	honors or activit periences or acco	ies, certifications, emplishments
MILITARY EX	XPERIENCE			
Did you serve in th	e U.S. Armed Forces?	Yes No		
	n member of the National Guar			
Please describe any	training relevant to the position	on for which you are applyi	ng	
REFERENCES	${f S}$ (Give names of three persons	s not rolated to you whom	vou have known	at least one year)
Nam	· · · · ·			Phone Number
			•	

Name & Address of Employer	Dates of Employment	Name & Title of Supervisor	Telephone	Position	Salary
	From:				Start:
	То:				End:
Major Responsibilities_					
Reason for Leaving					
Name & Address of Employer	Dates of Employment	Name & Title of Supervisor	Telephone	Position	Salary
	From:				Start:
	То:				End:
Major Responsibilities_					
Reason for Leaving					
Name & Address of Employer	Dates of Employment	Name & Title of Supervisor	Telephone	Position	Salary
	From:				Start:
	То:				End:
Major Responsibilities_					
Reason for Leaving					
Name & Address of Employer	Dates of Employment	Name & Title of Supervisor	Telephone	Position	Salary
	From:				Start:
	То:				End:
Major Responsibilities_					



## **Certification, Consent, and Release**

## \*Please read each statement carefully before signing\*

I certify that the information in this application is true and complete. I understand that misrepresentation, falsification or omission of facts may result in my termination, regardless of the time of discovery by the Company.

I authorize Midwest Mattress to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize my former employers to disclose to Midwest Mattress, any and all letters, reports and other information related to my work record without giving me prior notice of such disclosure. In addition, I hereby release Midwest Mattress my former employers and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigations or disclosure.

I understand that each job candidate who is offered employment may be required to a background check and may take a pre-employment drug/alcohol screening test at the company's expense within 30 days from the date of hire. I understand that employment is conditioned upon successful completion of this screening test.

I understand that this application will be considered active for 30 days, and that if I have not been employed within this time period, I will need to reapply for consideration. I also understand that, if hired, my employment is for no definite period and may be terminated at any time without written notice and that, absent a written contract signed by the President of the Company, I will remain an at-will employee and can be terminated at any time without any notice.

Thave read, understand, and consent to these statements.				
Applicant Signature	Date			

FOR EMPLOYER USE ONLY		
Date	Interviewed by	
Hire Yes No	Position	
Salary	Department	
Start Date	Approved	