

APPLICATION FOR EMPLOYMENT

(Please print clearly)

An Equal Opportunity Employer

We do not discriminate on the basis of race, religion, national origin, color, sex, age, veteran status, or disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job related factors.

Personal

Social Security No. _____ Date _____

Name _____
Last First Middle

Present Address _____
No. Street City State Zip

Telephone No. _____

Position applied for _____ Rate of pay expected \$ _____ per hour

Would you work _____ Full Time _____ Part Time Specify days if part time _____

List any friends or relatives working here, other than spouse _____

If your application is considered favorably, on what date will you be available for work? _____ 20____

Are there any other work experiences, skills, or qualifications that you feel would especially fit you for work here?

If you are applying for a job with minimum age requirements, you may be required to submit proof of age.

Date of Birth _____

Do you have a valid driver's license?.....yes _____ no _____

Driver's License No. _____ Class of License _____

Have you had your driver's license revoked or suspended in the last 3 years?.....yes _____ no _____

If hired, can you furnish proof you are eligible to work in the United States?.....yes _____ no _____

Have you ever been convicted of felony?.....yes _____ no _____

--A "yes answer does not automatically disqualify you from employment since the nature of the offense, date, and the job for which you are applying will be considered.

If yes, please explain _____

Have you previously applied here?.....yes _____ no _____

Personal References (not former employers or relatives)

Name _____ Telephone No. _____ Occupation _____

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Membership in Professional of Civic Organizations (do not include racial, religious, or nationality groups)

Name of organization _____ Dates involved _____ Position Held _____

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Education Record (Non Veterinarians Only)

High School _____ Degree Awarded _____

College or University _____ Degree Awarded _____

Business, Trade, or night school _____ Degree Awarded _____

Other _____ Degree Awarded _____

Education Record (Veterinarians Only)

High School _____ Degree Awarded _____

College or University _____ Degree Awarded _____

(Pre-Veterinary)

College (Veterinary) _____ Degree Awarded _____

Postgraduate training, including internships. (Please include date and degrees awarded, if any)

Are you board certified? _____ Board Eligible? _____ Which Speciality Board? _____

List continuing education courses attended in the past 18 months _____

List the states in which you are licensed to practice, along with the license numbers

Work History (begin with the most recent, list all past employers, including any pertinent military experience)

-Name of Company _____ Telephone No. _____

Immediate Supervisor _____ Dates Employed: From _____ to _____

Exact Job Title _____ Earnings at hire _____ Earnings at termination _____

Reason for termination _____

Description of duties _____

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Exact Job Title _____ Earnings at hire _____ Earnings at termination _____

Reason for termination _____

Description of duties _____

AFFIDAVIT

I certify that the answers given by me in the foregoing questions and statements are true and correct without any consequential omissions of any kind whatsoever. I agree that the company shall not be liable in any respect if my employment is terminated because of falsity of statements, answers, or omissions made by me in this questionnaire. I also authorize the companies, schools, or persons above to give any information regarding my employment, character, and qualifications. I hereby release said companies, schools, or persons from all liability for any damage for issuing this information. I understand that there is no implied contract of employment and that if employed I have been hired at the will of the employer and that my employment may be terminated at will, at any time, with or without cause. The employers only obligation being to pay salary or wages due and owing at the time of termination. Finally, I understand that all company property must be returned and my indebtedness to the company must be paid before my termination. I authorize the company to deduct from the final paycheck(s) all monies due and owing to the company.

Signature _____ Date _____