

EMPLOYMENT APPLICATION

This business provides equal employment opportunities to all applicants without regard to an applicant's race, color, religion, sex, gender, sexual orientation, genetic information, national origin, age, veteran status, disability, or any other status protected by federal or state law. We will provide reasonable accommodations to allow an applicant to participate in the hiring process (e.g., accommodation for a test or job interview) if so requested. Applications are maintained for 6 months. If you wish to be reconsidered after 6 months, you must re-apply.

PERSONAL DATA			
Last Name	First Name	Middle	Date
Street Address			Position Desired
City	State	Zip	
Home Phone	Other Phone (Work, Cell, etc.)	Personal Email Address	Date Available
Have you ever worked for a doggy daycare or kennel? If yes, when and where? <input type="radio"/> Yes <input type="radio"/> No			How Did You Hear About Us?
Available to work weekends and holidays? <input type="radio"/> Yes <input type="radio"/> No			Days of Week and Hours Available
Are you legally qualified to work in the United States? <input type="radio"/> Yes <input type="radio"/> No			
I understand that any offer of employment is contingent upon my presentation of one or more of the original documents required by the Immigration Reform and Control Act of 1986. Furthermore, I understand that should I not present these original documents on or before my first day of work, the actual commencement of my employment will be delayed until I provide this documentation.			

EMPLOYMENT HISTORY		
Please give accurate, complete full-time and part-time employment history, starting with the present or most recent employer.		
Company Name	Position/Title	
Address	Employed (month & year) From _____ To _____	
Manager or Supervisor	Phone	Reason for leaving
May we contact this person? <input type="radio"/> Yes <input type="radio"/> No		
Describe duties		
Company Name	Position/Title	
Address	Employed (month & year) From _____ To _____	
Manager or Supervisor	Phone	Reason for leaving
May we contact this person? <input type="radio"/> Yes <input type="radio"/> No		
Describe duties		
Company Name	Position/Title	

Address		Employed (month & year)	
		From	To
Manager or Supervisor		Phone	Reason for leaving
May we contact this person? <input type="radio"/> Yes <input type="radio"/> No			
Describe duties			

MILITARY SERVICE			
Active U.S. Military History (Do not include ROTC and Active Duty for Training)			
Branch of Service		From	To
Grade or Rank at Discharge		Occupational Specialization	
Other Training (not shown on above. Include military service schools and indicate dates, names, and address.)			

REFERENCES
Academic, Business, and Professional. (Give name, title, affiliation, complete address, and phone number)

Questionnaire
Tell us about you, please complete the following questions:
Do you have any special training or education concerning animals?
Why would this be a good job for you?
Do you have dogs living in your home? How do you discipline them? Please write a little about them.
Have you ever cared for a dog that was not your own?

Have you ever dealt with a dog with a medical emergency or injury? Please describe.
Have you ever been in a situation with an aggressive or fearful dog?
Anything else we need to know?

I hereby certify that the answers I gave to the foregoing questions and statements are true and correct and hereby authorize the recipient of my application to verify the same. If employment is obtained under this application, I will comply with all orders, rules, and regulations of the company. I authorize my former employers and educational institutions to give any information they have regarding me. I hereby release them and their organizations from liability for any damage whatsoever for issuing same. If upon investigation, anything contained in this application is found to be untrue, I will be subject to dismissal at any time during my period of employment. I understand that employment at this company is at-will and may be terminated at any time for any reason by either party. The at-will employment status will not and cannot be superseded or revoked or made invalid by any verbal or written statement by any supervisor, manager, or Board Member unless in writing, signed by both parties. I understand that, if hired, I may not hold other employment, nor engage in other activities that create a conflict of interest unless given permission in writing.

Applicant's Signature	Date
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