



## Complete Pet Care Animal Hospital

### Application for Employment

(Please Print)

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

**Personal :**

Last Name	First	Middle	Date
Street Address		Home Phone	
City, State, Zip		Business Phone	
Position Applying for:		Pay expected	
		\$ _____ per _____	

**Work Availability:**

List in order of preference the days of the week you would like to work  
(June 17-July 20 OR July 22-August 24)

Monday/Thursday	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>
Tuesday/Friday	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>
Wednesday/Saturday	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>



**Education:**

School	Name and location of School	Expected Graduation Date	No. Of years completed	Did you graduate?	Diploma or Degree
High School					

**Employment:**

	Company Name	Telephone
	Address	Employed - (Give Month and year) From                      To
<b>1</b>	Name of Supervisor	Weekly Pay Start                      Last
	State Job Title and Describe Your Work	Reason for leaving

**Additional Information:**

Are you legally eligible for employment in the United States? \_\_\_\_\_

Is there any information we need to know about your name or the use of another name for us to be able to check your work record? Please specify. \_\_\_\_\_  
\_\_\_\_\_

How were you referred to Falls Pointe Animal Hospital? \_\_\_\_\_

Have you ever been arrested or convicted of a crime? \_\_\_\_ Yes \_\_\_\_ No If yes please explain \_\_\_\_\_  
\_\_\_\_\_



**References:** Please do not include Relatives or former employers.

1) Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Occupation: \_\_\_\_\_

2) Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Occupation: \_\_\_\_\_

**Signature:**

The information provided in this application for employment is true, correct and complete.  
If you employ me, any misstatement or omission of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment creates no obligation upon you, the employer, to continue to employ me in the future.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature