



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 14-July 18 OR July 19-August 22)

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



Education:

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

Employment:

1	Company Name	Telephone
	Address	Employed - (Give Month and year) From To
	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