

WHITE KNOLL VETERINARY HOSPITAL & PET RESORT EMPLOYMENT / JOB APPLICATION

PERSONAL INFORMATION

FULL NAME: _____ DATE: _____
First Middle Last

ADDRESS: _____
Street Address Apt/Suite
City State Zip Code

E-MAIL: _____ PHONE: _____

SOCIAL SECURITY NUMBER (SSN): _____ - _____ - _____ DOB: _____

DATE AVAILABLE: _____ DESIRED HOURLY PAY: \$ _____

EMPLOYMENT DESIRED: FULL-TIME PART-TIME SEASONAL
(check box next to available day and write in available hours) **WORK HOILDAYS AND WEEKENDS ARE REQUIRMENT OF JOB**

Applying for	Days/hours available to work
<input type="checkbox"/> Front Desk & Retail	Mon. _____
<input type="checkbox"/> Kennel Assistant	Tues. _____
<input type="checkbox"/> Daycare Attendant	Wed. _____
<input type="checkbox"/> Groomer	Thus _____
<input type="checkbox"/> Driver	Fri. _____
	Sat. _____
	Sun. _____

EMPLOYMENT ELIGIBILITY

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S.? YES NO*

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES* NO *IF YES, PLEASE EXPLAIN: _____

EDUCATION

ARE YOU CURRENTLY IN HIGH SCHOOL? YES NO YEAR EXPECTED TO GRADUATE: _____

HIGH SCHOOL: _____ CITY / STATE: _____

FROM: _____ TO: _____

GRADUATE? YES NO DIPLOMA: _____

COLLEGE: _____ CITY / STATE: _____

FROM: _____ TO: _____

GRADUATE? YES NO DEGREE: _____

PREVIOUS EMPLOYMENT

IS THIS MY FIRST JOB WORKING WITH ANIMALS? YES NO*

TRAINING WAGE IS \$5.25 AN HOUR FOR 90 DAYS? YES NO*

EMPLOYER 1: _____
Company / Individual

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

EMPLOYER 2: _____
Company / Individual

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____ RESPONSIBILITIES: _____

FROM: _____ TO: _____

REASON FOR LEAVING: _____

CONSENT

IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK? YES NO

IF ASKED, ARE YOU WILLING TO CONSENT TO A DRUG TEST ? YES NO

DO YOU HAVE A DRIVERS LICENCE? YES NO

WHAT IS YOUR MEANS OF TRANSPORTATION TO WORK: _____

DISCLAIMER

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

Please complete each section EVEN IF you decide to attach a resume.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE _____ **DATE** _____

PRINT NAME _____