

EMPLOYMENT APPLICATION



APPLICANT INFORMATION:

Name: _____ Date: _____

Address: _____ Telephone: _____

City: _____ State: _____ Zip: _____ E-mail: _____

How were you referred to us: _____

Desired Position: _____ Full time: Part time:

Our regular hours of operation are : Monday – Friday: 7:30 AM to 6:00 PM Saturday: 8:30 AM to 12:00 PM

Are there any days and/or evenings you cannot work? If so, please specify:

What qualities do you possess that would help you in an animal care environment:

What interests you about working with animals and the owners of animals:

Have you worked for a veterinarian before? Yes No Location: _____

Would you have difficulties lifting a 35 pound dog into a cage 4 feet above the ground? Yes No

What do you like most about your current/last job?

What do you like least about your current/last job?

Are you eligible to work in the United States according to all federal laws? Yes No

EDUCATION

High School: _____ Did you graduate? Yes No

City/State: _____ GPA: _____

College/University: _____ Did you graduate? Yes No

Degree: _____ Number of years completed? _____

City/State: _____ GPA: _____

EMPLOYMENT HISTORY (Begin with your most recent employer, even if submitting a resume)

Employer: _____ Job Title: _____

Dates of Employment: Starting _____ Ending _____

Pay Rate: Starting _____ Ending _____

Supervisor's Name: _____ Supervisor's Phone: _____

Duties: _____

Reason for leaving: _____

May we contact this employer for a reference? Yes No

Employer: _____ Job Title: _____

Dates of Employment: Starting _____ Ending _____

Pay Rate: Starting _____ Ending _____

Supervisor's Name: _____ Supervisor's Phone: _____

Duties: _____

Reason for leaving: _____

May we contact this employer for a reference? Yes No

"I authorize Hyde Park Veterinary Clinic to make any investigation of my employment history and authorize any former employer, person, firm, corporation, or government agency to give Hyde Park Veterinary Clinic any information that they may have regarding me in consideration of Hyde Park Veterinary Clinic's review of this application. I release Hyde Park Veterinary Clinic and all providers of information from all liability as the result of furnishing and receiving this information".

X

Applicant's Signature

X

Date