



# APPLICATION FOR EMPLOYMENT

## An Equal Opportunity Employer

We do not discriminate on the basis of race, religion, national, color, sex, age, veteran status, or disability.  
It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job-related factors

### Personal

Social Security Number \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_

Present Address \_\_\_\_\_ Telephone no. \_\_\_\_\_

Position applied for \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_ hourly

Are seeking \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time / Specify days and hours if needed \_\_\_\_\_

Were you previously employed by this organization? \_\_\_\_\_ If yes, When? \_\_\_\_\_

List any friends or relatives working here \_\_\_\_\_

On what date will you be available for work? \_\_\_\_\_

Are there any other experiences, skills, or qualifications that you would feel especially fit you for work here?  
Please add any additional comments you think are important for us to consider.

\_\_\_\_\_  
\_\_\_\_\_

If hired, can you furnish proof you are eligible to work in the United States?  Yes  No

Have you ever been convicted of a felony?.....  Yes  No

A "yes" answer does not automatically disqualify you from employment since the nature of the offense, date, and the job for which you are applying will be considered.

If yes please explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Have you previously applied here?.....  Yes  No

If yes When? \_\_\_\_\_

Have you worked for any firm under a different name?.....  Yes  No

If yes, give name \_\_\_\_\_

**Personal References (not former employers or relatives)**

| Name and Occupation | Address | Phone Number |
|---------------------|---------|--------------|
|                     |         |              |
|                     |         |              |
|                     |         |              |

**Membership in Professional or Civic Organizations (do not include racial, religious or nationality groups)**

| Name or description of organization | From | To | Offices Held |
|-------------------------------------|------|----|--------------|
|                                     |      |    |              |
|                                     |      |    |              |
|                                     |      |    |              |

**Education Record — Non-Veterinarians Only**

| Name of school           | Degree Awarded | Grade Average | Honors |
|--------------------------|----------------|---------------|--------|
| High School              |                |               |        |
| College or University    |                |               |        |
| Business or Trade School |                |               |        |
| Other                    |                |               |        |

**Education Record — Veterinarians Only**

| Name of school   | Degree Awarded  | Grade Average | Honors |
|--|-----------------|---------------|--------|
| High School  |                 |               |        |
| College or University Pre Vet  |                 |               |        |
| College Vet Curriculum   |                 |               |        |
| Postgraduate training, including internships include dates and degrees awarded, if any |                 |               |        |
|  |                 |               |        |
|  |                 |               |        |
| Are you board certified?   | Board eligible? |               |        |
| Which specialty board?   |                 |               |        |
| List Continuing education attended in the past 18 months                               |                 |               |        |
|  |                 |               |        |
|  |                 |               |        |
| List the states in which you are licensed to practice along with license number        |                 |               |        |
|  |                 |               |        |

**Work History (begin with the most recent, list all past employers, including any pertinent military experience)**

|                       |                      |                |                        |                          |
|-----------------------|----------------------|----------------|------------------------|--------------------------|
| Name of Company       | Business Address     | City           | State                  | Phone Number             |
| Type of Business      | Immediate Supervisor |                |                        | Date Employed<br>From To |
| Exact Job Title       | Earnings at Hire     | At Termination | Reason for Termination |                          |
| Description of Duties |                      |                |                        |                          |
|                       |                      |                |                        |                          |
|                       |                      |                |                        |                          |

|                       |                      |                |                        |                          |
|-----------------------|----------------------|----------------|------------------------|--------------------------|
| Name of Company       | Business Address     | City           | State                  | Phone Number             |
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| Exact Job Title       | Earnings at Hire     | At Termination | Reason for Termination |                          |
| Description of Duties |                      |                |                        |                          |
|                       |                      |                |                        |                          |
|                       |                      |                |                        |                          |

|                       |                      |                |                        |                          |
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| Name of Company       | Business Address     | City           | State                  | Phone Number             |
| Type of Business      | Immediate Supervisor |                |                        | Date Employed<br>From To |
| Exact Job Title       | Earnings at Hire     | At Termination | Reason for Termination |                          |
| Description of Duties |                      |                |                        |                          |
|                       |                      |                |                        |                          |
|                       |                      |                |                        |                          |

**Affidavit**

Please read each statement carefully before signing

I certify that all information I have provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time if employed. I understand that I have been hired at the will of the employer and my employment may be terminated at any time with or without cause and with or without notice. I have read, understand, and by my signature consent to these statement.

Signature \_\_\_\_\_ Date \_\_\_\_\_