

Salazar Road Veterinary Clinic

Application for Employment

Date: _____

Position Desired: _____

Name: _____
Last First Middle

Mailing Address: _____
City State Zip

Physical Address: _____
City State Zip

How long have you lived at your current address? _____

Home phone: _____ Cell Phone: _____

Emergency Contact Name: _____ Phone: _____

Driver's License State and Number: _____

Have you ever applied for a position here before (If yes, when?) _____

Schedule preferred: _____

Full Time: _____ Part Time: _____

On what date would you be available for work? _____ Desired salary: _____

Are you currently employed? _____ If yes, may we contact your employer? _____

Have you ever been convicted of a felony or misdemeanor? _____ If yes, please explain: _____

You will not be denied employment solely because of a conviction record, unless the offense is related to the position for which you are applying. _____

EDUCATION

NAME OF SCHOOL	DATES ATTENDED	GRADUATED?	SPECIAL STUDIES

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EMPLOYMENT HISTORY

EMPLOYER	DATES WORKED	JOB DESCRIPTION	REASON LEFT

Do you speak, read or write any languages beside English? _____

EMPLOYMENT/PERSONAL REFERENCES

(Please list 3 references other than relatives, at least 2 previous employers)

NAME	RELATIONSHIP	PHONE NUMBER	YEARS KNOWN

Any additional information you feel may be useful to us in considering your application?

I certify that the facts in this applicaion are true and complete to the best of my knowledge and I understand that if I am employed, falsified statements on this application shall be grounds for dismissal.

Signature: _____ Date: _____