


Employment Application

- Please complete this application by typing or printing in ink. INCOMPLETE or UNSIGNED applications will not be considered.
- We are an equal opportunity employer. We do not discriminate on the basis of race, religion, color, sex, age, national origin, marital status, sexual preference, or disability.
- Do you need an accommodation to participate in the application or interview process? Yes No

PERSONAL DATA

Legal Name _____ DOB _____ SS# _____
 Present Address _____ City _____ State _____ Zip _____
 Prior Addresses _____
 Home Phone _____ Cell Phone _____ Email Address _____
 Driver's License: Operator CDL CDL Type _____ Is your driver's license suspended in any U.S. state? Yes No
 Driver's License Number _____ State _____ Exp. Date _____
 Are you a veteran of military service? Yes No Are you legal U.S. citizen? Yes No
 Race White African-American Hispanic American Indian Asian Middle-Eastern Alaskan Native

EDUCATION

High School Diploma? Yes No Post Secondary Degree? AA BA MA PhD
 Name of school(s) include high school _____

 Training Length _____ Date Completed _____
 Major _____ Minor _____

WORK EXPERIENCE (Most recent first)

Dates (from-to) _____ Reason for Leaving _____
 Company Name _____ Immediate Supervisor _____
 Company Address _____ City _____ State _____ Zip _____
 Job Title _____ Phone _____
 Job Description (duties, skills, equipment used) _____

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 Job Description (duties, skills, equipment used) _____

ADDITIONAL INFORMATION

Have you ever been convicted of a felony in any U.S. state? Yes No

If yes, please explain

Have you ever been bitten by an animal? Yes No If yes, what species?

Do you have experience training a dog or a cat? Yes No

Which Position Are You Applying For? Trainer In-Home Pet Sitter Dog Walker Administrative

List the animals you have experience working with:

Please explain some of the techniques you have used to affect positive behavioral change.

Emergency Contact:

PERSONAL REFENCES (Preferably individuals who know about your work/training and are not related to you)

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone

NOTE: The information that you provide on this application is subject to verification. Falsification or misrepresentations may disqualify you for consideration for employment or, if hired, may be grounds for termination at a later date.

This company has a zero tolerance policy regarding illegal drug use. If this company observes erratic behavior associated with such drug use by any of its employees they may be asked to submit to drug testing. If requested, I am willing to submit to drug testing for street drugs Yes No.

With my signature below (typed or written), I certify that all information on this and all pages attached to this application are true, correct and completed to the best of my knowledge and contains no willful falsifications or misrepresentations. I authorize all former employers to relate job-related information they may have about me and I release all persons or companies from any liability or responsibility for providing such information.

Is there anything else you wish for us to know about You? If so, please feel free to share that information below.

SIGNATURE

DATE