

HAMBRIGHT ANIMAL HOSPITAL

Employment Application



APPLICANT INFORMATION

| | | | | | |
|-------------------------------------------|-----|----------------|------------------------------------------------|------------------|------|
| Last Name | | First | | M.I. | Date |
| Street Address | | | | Apartment/Unit # | |
| City | | State | | ZIP | |
| Phone | | E-mail Address | | | |
| Date Available | | | | Desired Salary | |
| Position Applied for | | | | | |
| Are you a citizen of the United States? | YES | NO | If no, are you authorized to work in the U.S.? | YES | NO |
| Have you ever worked for this company? | YES | NO | If so, when? | | |
| Have you ever been convicted of a felony? | YES | NO | If yes, explain | | |

EDUCATION

| | | | | | |
|-------------|----|-------------------|-----|----|--------|
| High School | | Address | | | |
| From | To | Did you graduate? | YES | NO | Degree |
| College | | Address | | | |
| From | To | Did you graduate? | YES | NO | Degree |
| Other | | Address | | | |
| From | To | Did you graduate? | YES | NO | Degree |

REFERENCES

Please list three professional references.

| | | |
|-----------|--|--------------|
| Full Name | | Relationship |
| Company | | Phone () |
| Address | | |
| Full Name | | Relationship |
| Company | | Phone () |
| Address | | |
| Full Name | | Relationship |
| Company | | Phone () |
| Address | | |

PREVIOUS EMPLOYMENT

| | | | |
|----------------------------------------------------------|-----------------|--------------------|------------------|
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary | \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | YES | NO |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary | \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | YES | NO |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary | \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | YES | NO |

MILITARY SERVICE

| | | |
|----------------------------------|-------------------|----|
| Branch | From | To |
| Rank at Discharge | Type of Discharge | |
| If other than honorable, explain | | |

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|