



JUST CATS

VETERINARY CLINIC, PC

Application for Employment

(Please Print Clearly)

An Equal Opportunity Employer

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

Personal

Social Security No. _____ Date _____

Name _____
Last First Middle

Present address _____
No. Street City State Zip

Phone number _____ Email _____

Position applied for _____ Rate of pay expected \$ _____ per hour

Were you previously employed by Just Cats? _____ If yes, when? _____

List any friends or relatives working here _____

If your application is considered favorably, on what date will you be able to work? _____

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

If you are applying for a job with minimum age requirements, you may be required to submit proof of age.

For jobs with minimum age requirements:

Are you 18 years of age or older? Yes No

For driving jobs only: Do you have a valid driver's license? Yes No

Driver's license number _____ Class of license _____

Have you ever had your driver's license revoked or suspended in the last 3 years? Yes No

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, state 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 _____



If you have a resume, please attach it with your application.

If the information asked below is included in your resume it still needs to be included on this page.

Personal References (not former employees or relatives)

Name & Occupation	Address (city & state)	Phone number

Membership in Professional or civic organizations (do not include racial, religious or nationality groups)

Name or descriptions of organization	Active participation		Offices held
	From	To	

Educational record

Typing speed _____ WPM

Name of school	Degree awarded	Grade average	Honors
High School			
College or University			
Business, Trade, Correspondence or Night School			
Other			

Work History

(Begin with the most recent, list all past employers, including any pertinent military experience)

1) Last or Present Job

Company Name		Job Title	
Street Address		City	State
Starting Pay	Ending Pay	Date Employed From	Date Employed To
Supervisor Name		Title	Telephone Number
Description of Duties:			
Reason for Leaving:			



2) Previous Job

Company Name		Job Title	
Street Address		City	State
Starting Pay	Ending Pay	Date Employed From	Date Employed To
Supervisor Name		Title	Telephone Number
Description of Duties:			
Reason for Leaving:			

3) Previous Job

Company Name		Job Title	
Street Address		City	State
Starting Pay	Ending Pay	Date Employed From	Date Employed To
Supervisor Name		Title	Telephone Number
Description of Duties:			
Reason for Leaving:			

4) Previous Job

Company Name		Job Title	
Street Address		City	State
Starting Pay	Ending Pay	Date Employed From	Date Employed To
Supervisor Name		Title	Telephone Number
Description of Duties:			
Reason for Leaving:			



Affidavit

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 employment and may result in my dismissal if discovered at a later date. I understand that the employer may request an investigative consumer report from a consumer reporting agency. This report may include information as to my character, reputation, personal characteristics and mode of living obtained from neighbors, friends, former employers, schools and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation. I authorize the investigation of any or all statements contained in this application and I also authorize any person, school, current employer (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GURANTEE 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 ANYTIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I have read, understand and by my signature consent to these statements.

Signature _____

Date _____

Parent or Guardian name _____

If applicant is under the age of 18

Signature _____

Date _____

FOR EMPLOYER'S USE ONLY

Reference Check

Date called	Company called	Person contacted	Comments