

Application for Employment

Best Friends Veterinary Center

2082 Cheyenne Court
Grafton, WI 53024

Best Friends Veterinary Center does not discriminate on the basis of race, religion, color, national origin, creed, gender, age, disability, marital or veteran status, or any other legally protected status. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job-related factors.

Please Print Clearly

Position(s) Applied For: **CVT** **Assistant** **Receptionist** **Kennel**

Attendant

Social Security Number _____ Date _____

Name (Last, First, MI) _____

Address, State, Zip _____

Telephone Number(s): (____) _____ (____) _____

Email Address: _____ Desired salary range ____/hour

Have you ever filed an application with us before? Yes No If Yes, give date _____

Have you ever been employed with us before? Yes No If Yes, give date _____

Do any of your friends or relatives, other than spouse, work here? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No (proof of citizenship/immigration status will be required upon employment)

Are you available to work: Full-Time (please indicate 1 2 shift) Year Round Summer

Part-Time (please indicate Mornings Afternoon Evenings)

Year Round Summer Only

Please list days and hours you **cannot** work: _____

Do you have transportation to work? _____ Can you lift at least 50 pounds? _____

Have you ever been convicted of a crime? Yes No If Yes, please explain:

Why do you want to work for Best Friends Veterinary Center?

Educational Record

	Name of School	Course of Study	Years Completed	Diploma/ Degree Awarded <small>(please indicate Yes or No)</small>	G.P.A.
High School					
Undergraduate College					
Graduate Professional					
Other (Specify)					

Describe any specialized training, apprenticeships, skills or extra-curricular activities.

Specialized Skills (check all that you have operated and are proficient at)

Excel Microsoft Word Credit Card Machine

Copier Fax Machine Cash Register

Other: _____

Do you type? Yes No Approximate WPM? _____

Employment History

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Are you currently employed? _____ May we contact your present employer? _____

Employer _____	Phone () _____
Address, City, State _____	
Job Title _____	Dates employed: From: _____ To: _____
Supervisor: _____	Hourly Wage: Starting: _____ Final _____
Work Performed: _____	

Reason(s) for Leaving: _____	

Employer _____	Phone () _____
Address, City, State _____	
Job Title _____	Dates employed: From: _____ To: _____
Supervisor: _____	Hourly Wage: Starting: _____ Final _____
Work Performed: _____	

Reason(s) for Leaving: _____	

Employer _____ Phone () _____
Address, City, State _____
Job Title _____ Dates employed: From: _____ To: _____
Supervisor: _____ Hourly Wage: Starting: _____ Final _____
Work Performed: _____

Reason(s) for Leaving: _____

Employer _____ Phone () _____
Address, City, State _____
Job Title _____ Dates employed: From: _____ To: _____
Supervisor: _____ Hourly Wage: Starting: _____ Final _____
Work Performed: _____

Reason(s) for Leaving: _____

List any skills, experiences or qualifications that you feel are important for us to consider when reviewing your application:

References

Please list the name, address and telephone number of three people who are not related to you.

1. _____

2. _____

3. _____

4. _____

Note to Applicant: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

YES _____ NO _____

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer

Applicant Signature

Date