



## Application for Employment

Thank you for your interest in joining our team! Huntsville Pet Clinic is an equal opportunity employer. All qualified candidates will be considered for open positions. Eligible applicants will be contacted by our hiring manager in a timely manner either by email or phone.

### General Information

Applicant's name: \_\_\_\_\_ Social Security # \_\_\_\_\_

DL# \_\_\_\_\_ State issued \_\_\_\_\_ D.O.B if under 21 \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ (H) (W) (C)

Alternate Phone: \_\_\_\_\_ (H) (W) (C)

Email address: \_\_\_\_\_

Which position are you applying for? \_\_\_\_\_

Are you currently employed? \_\_\_\_\_

If hired, date available to report to work: \_\_\_\_\_

I am interested in a:  Part time position  Full time position  Seasonal/temporary position

Expected wages \_\_\_\_\_ per hour

I am available to work \_\_\_\_\_ hours per week and on the following schedule;

*Please indicate your availability to work (Monday through Friday, 6:30am to 8pm)*

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday



Are you available to work nights, weekends and holidays in a rotation?  Yes  No

Do you have dependable means of transportation to/from work?  Yes  No

***The following questions are required by the DEA:***

Within the past five years, have you been convicted of a felony, or within the past two years, of any misdemeanor or are you presently formally charged with committing a criminal offense? (Do not include any traffic violations, juvenile offenses or military convictions, except by general court-martial.)

Yes  No

If the answer is yes, furnish details of conviction, offense, location, date and sentence.

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In the past three years, have you ever knowingly used any narcotics, amphetamines or barbiturates, other than those prescribed to you by a physician?

Yes  No

If the answer is yes, furnish details

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## Education and training history

List all schools and training facilities attended

1. Name and location of school: \_\_\_\_\_

Course of study: \_\_\_\_\_ Dates attended \_\_\_\_\_

Degree or certificate received: \_\_\_\_\_ Graduated  Yes  No

2. Name and location of school: \_\_\_\_\_

Course of study: \_\_\_\_\_ Dates attended \_\_\_\_\_

Degree or certificate received: \_\_\_\_\_ Graduated  Yes  No

3. Name and location of school: \_\_\_\_\_

Course of study: \_\_\_\_\_ Dates attended \_\_\_\_\_

Degree or certificate received: \_\_\_\_\_ Graduated  Yes  No

I have a high school diploma or equivalent (GED certificate)  Yes  No

## Other licensure, registration and/or certificates

List any relevant professional licenses, registration or certificates

Description	State	Number	Expiration



## Specialized skills and experience

Please list any specialized skills or experiences you have acquired which may be relevant to the position that you are applying for (such as typing fluency, foreign languages, computer/veterinary software experience, and volunteer experience).

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## Employment history *(please list most recent job first)*

1. Employer: \_\_\_\_\_ Name of supervisor: \_\_\_\_\_

Employer address: \_\_\_\_\_

Employer phone: \_\_\_\_\_ Employer email: \_\_\_\_\_

Your job title: \_\_\_\_\_ Hours worked per week: \_\_\_\_\_

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

Duties and responsibilities: \_\_\_\_\_

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Reason for leaving: \_\_\_\_\_

2. Employer: \_\_\_\_\_ Name of supervisor: \_\_\_\_\_

Employer address: \_\_\_\_\_

Employer phone: \_\_\_\_\_ Employer email: \_\_\_\_\_

Your job title: \_\_\_\_\_ Hours worked per week: \_\_\_\_\_

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

Duties and responsibilities: \_\_\_\_\_



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Reason for leaving: \_\_\_\_\_

3. Employer: \_\_\_\_\_ Name of supervisor: \_\_\_\_\_

Employer address: \_\_\_\_\_

Employer phone: \_\_\_\_\_ Employer email: \_\_\_\_\_

Your job title: \_\_\_\_\_ Hours worked per week: \_\_\_\_\_

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

Duties and responsibilities: \_\_\_\_\_

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Reason for leaving: \_\_\_\_\_

4. Employer: \_\_\_\_\_ Name of supervisor: \_\_\_\_\_

Employer address: \_\_\_\_\_

Employer phone: \_\_\_\_\_ Employer email: \_\_\_\_\_

Your job title: \_\_\_\_\_ Hours worked per week: \_\_\_\_\_

Dates of employment: From \_\_\_\_\_ to \_\_\_\_\_

Duties and responsibilities: \_\_\_\_\_

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Reason for leaving: \_\_\_\_\_



## Certification and signature

- *I understand that any verbal or written statement that is false, fraudulent or misleading that is contained in this application or attached materials, or made in the course of any related employment process, whether made by me or by others at my request, will result in rejection of my application, denial of employment, or dismissal from service if discovered after employment, and under some circumstances, may result in prosecution of a crime.*
- *I certify that all statement contained herein are true and complete.*
- *I understand that if hired, I must prove that I am legally authorized to work in the US.*
- *I authorize Huntsville Pet Clinic to check employment references and verify education information provided on this employment application and as disclosed in the interview process.*
- *I authorize Huntsville Pet Clinic to run a credit history check and criminal history background check as a condition of employment.*
- *I release Huntsville Pet Clinic and all providers of information from any liability as a result of furnishing and receiving any information related to the hiring process.*

Printed name of applicant: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_