

Urban Tails Pet Resort
APPLICATION FOR EMPLOYMENT

Date _____

PERSONAL INFORMATION

NAME _____ SOCIAL SECURITY NUMBER _____

LAST FIRST MIDDLE

PRESENT ADDRESS _____

STREET CITY STATE ZIP

PERMANENT ADDRESS _____

STREET CITY STATE ZIP

PHONE NO. _____

ARE YOU 18 YEARS OR OLDER? Yes NO IF NO, DATE OF BIRTH _____

DO YOU (OR YOUR FAMILY) OWN ANY PETS? YES NO HOW MANY DOGS _____ CATS _____
OTHER _____

EMPLOYMENT DESIRED

POSITION YOU ARE APPLYING FOR _____ DATE AVAILABLE _____

FULL TIME PART TIME TEMPORARY

NUMER OF HOURS AVAILABLE PER WEEK: _____

HAVE YOUR WORKED AT THIS COMPANY BEFORE? Yes No

IF YES WHEN? _____

DO YOU HAVE ANY FRIENDS WORKING HERE NOW? _____ BEFORE _____

DO YOU HAVE ANY RELATIVES WORKING HERE NOW? _____ BEFORE _____

NAME _____

EDUCATIONAL HISTORY

SCHOOL	YEARS COMPLETED	NAME AND ADDRESS	MAJOR COURSE OF STUDY	DID YOU GRADUATE?
HIGH SCHOOL				YES ____ NO ____
COLLEGE OR UNIVERSITY				YES ____ NO ____
TRADE SCHOOL, Etc.				YES ____ NO ____

WHAT SCHOOL ACTIVITIES AND ORGANIZATIONS DID YOU PARTICPATE IN? _____

WORK HISTORY: PLEASE LIST YOUR MOST RECENT EMPLOYMENT FIRST.

DATE EMPLOYED	NAME AND ADDRESS	*SALARY	POSITION	REASON FOR LEAVING

*APPLICANT NEED NOT ANSWER. FAILURE TO DO SO WILL HAVE NO BEARING ON CONSIDERATION FOR EMPLOYMENT.

LIST THE COMPUTER SOFTWARE PACKAGES AND OFFICE EQUIPMENT YOU ARE PROFICIENT WITH. _____

WHAT OTHER SPECIAL QUALIFICATIONS DO YOU HAVE, NOT LISTED ABOVE? _____

REFERENCES

GIVE THE NAMES OF TWO PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

We are an equal opportunity employment company. We are dedicated to a policy of non-discriminatory employment in accordance with federal and state laws which prohibit discrimination on the basis of race, religion, creed, national origin, color, ancestry, age, sex, marital status, disability, height, weight, citizenship or veteran status.

I understand that if I am selected as a final candidate for employment, I may be required by Urban Tails, LLC, to submit to a drug test and criminal history check. My refusal to consent to these tests or a positive test result will result in refusal of further consideration for employment.

I understand that to be employed I must be lawfully authorized to work in the United States, and I must show the employer documents that will prove this. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand that any false or misleading statement made by me in connection with this application or the failure to disclose any material information will be grounds for immediate dismissal. I understand that if hired I will have a probationary period during which time I may be terminated at the discretion of the company. Thereafter, the terms of my continued employment will be pursuant to the written employment policies that the company may from time to time determine.

SIGNATURE OF APPLICANT _____ **DATE:** ___/___/___

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY _____

DATE _____

HIRED: YES NO

POSITION _____

SALARY/WAGE _____

DATE REPORTING TO WORK _____

APPROVED 1. _____

2. _____
