



Application for Employment

An Equal Opportunity Employer

Date: _____

Name: _____
(Last) (First) (MI)

Address: _____ City: _____ State: _____ Zip Code: _____

Email: _____

HomePhone# _____ BusinessPhone# _____ Date to Start _____

Position desired _____ Salary Desired _____

Are you presently employed? Yes No If so, may we inquire of your present employer? Yes No Have you applied to Central Park in the past? Yes No

Are you available to work Full Time Part Time Shift Work Temporary Overtime

Briefly summarize job-related training, skills, certifications, languages, and/or other qualifications:

OTHER:

Are you able to meet attendance requirements? Yes No

Can you submit proof of legal employment authorization and identity? Yes No

If you are under 18, can you furnish a work permit if it is required? Yes No

Have you ever been convicted of a crime in the last 7 years?
If yes, please explain (a conviction will not automatically bar employment): Yes No

Education	Name of School/Address	Area of Study	Did you Graduate?
High School			
College			

It is the policy of Central Park Dog Daycare, to comply with all applicable State and Federal laws prohibiting discrimination in employment based on race, color, sex, religion, national origin, disability, or other protected classifications.

APPLICATION FOR EMPLOYMENT

EMPLOYMENT HISTORY *(Past 7 years. If more space is needed, please use the back of form)*

Name/Address of Present or Last Employer		Phone Number		Supervisor's Name	
Position Held		Dates Employed (<i>Month/Yr – Month/Yr</i>)		Starting Salary	Final Salary
		To	From	\$	\$
Reason for Leaving:			May We Contact This Employer?		
			Contact Name:		
Brief Description of Duties:					
Name/Address of Previous Employer		Phone Number		Supervisor's Name	
Position Held		Dates Employed (<i>Month/Yr – Month/Yr</i>)		Starting Salary	Final Salary
		To	From	\$	\$
Reason for Leaving:			May We Contact This Employer?		
			Contact Name:		
Brief Description of Duties:					
Name/Address of Previous Employer		Phone Number		Supervisor's Name	
Position Held		Dates Employed (<i>Month/Yr – Month/Yr</i>)		Starting Salary	Final Salary
		To	From	\$	\$
Reason for Leaving:			May We Contact This Employer?		
			Contact Name:		
Brief Description of Duties:					
Name/Address of Previous Employer		Phone Number		Supervisor's Name	
Position Held		Dates Employed (<i>Month/Yr – Month/Yr</i>)		Starting Salary	Final Salary
		To	From	\$	\$
Reason for Leaving:			May We Contact This Employer?		
			Contact Name:		
Brief Description of Duties:					

APPLICATION FOR EMPLOYMENT

REFERENCES

Give name, address, phone number of three references who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application or other materials or documents presented will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specific length of employment that this application does not constitute an agreement or contract for employment. Accordingly, either the employer or I can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant's Signature

Date

REFERENCE CHECK		
------------------------	--	--

Reference	Comments	Checked By

1. Please describe the character/body language of the following dogs:

Aggressive: _____

Dominant: _____

Submissive: _____

2. In a daycare/social setting, what are the pros and cons of a submissive dog?

3. What would you do in the event of a dog fight? Please describe in detail.

4. Outside of seeing a flea, what are two signs that might indicate fleas?

5. Are you familiar with any of the following health conditions? Please give a brief description to include causes, signs and symptoms.

Tapeworms: _____

Roundworms: _____

Allergies: _____

Stress: _____

Kennel Cough: _____

Upset Stomach: _____