

Employment Application

It is the policy of the Manetto Hill Animal Hospital to provide equal employment opportunites to all qualified persons without regard to race, creed, color, sex, seual orientation, age, national origin or disabilities. The Manetto Hill Animal Hospital is a smoke-free, drug-free environment.

Please type or print our answers. If you print, please do so in blue or black ink and write neatly. An illegible application may preclude you from consideration.

Personal Information	
Name:	Home Phone:
Address:	E-Mail Address:
City	Social Security No.:
State, Zip Code:	Driver Lic. No. & State:
Are you a U.S. Citizen or otherwise authorized to work in the United States on an unrestricted basis:	Yes No
If applicable, please list your visa type, visa # and expiration	
Visa No.: Type:	Expiration:
Have you ever been convicted of a felony? Yes No	If you answered yes, please explain:
Employme	ent History
Current Employer:	Salary:
Address:	Telephone No.:
Your position:	Dates of Employment: to
Supervisor Name: Title:	May we contact? Yes No
Reason for leaving:	
Prior Employer:	Salary:
Address:	Telephone No.:
Your position:	Dates of Employment: to
Supervisor Name: Title:	May we contact? Yes No
Reason for leaving:	
Prior Employer:	Salary:
Address:	Telephone No.:
Your position:	Dates of Employment: to
Supervisor Name: Title:	May we contact? Yes No
Reason for leaving:	

Education	
High School Name:	Did you graduate?
Address:	Attended from: to:
If you did not graduate, did you receive your GED? Yes No	
College Name:	Did you graduate? Yes No
Address:	Attended from: to:
Degree:	Major:
College Name:	Did you graduate? Yes No
Address:	Attended from: to:
Degree:	Major:
Position Information	
Position Applying for:	How did you hear about the job?
What hours can you work: From To Monday Tuesday Wednesday Thursday Friday Saturday Sunday Please describe any skills you have in: Computers, Pet Care, L	Can you work weekends?
I hereby certify that my answers and assertions set forth in this application are true and complete to the best of my knowledge. If I am employed, I understand that any false statements on this application shall be considered sufficient cause for my dismissal. I hereby authorize this company to investigate any aspect of my prior educational and employment history. Furthermore I understand that if I am hired, employment with this company is "at will," which means that either the company or I can terminate my employment for any reason not prohibited by state or federal law.	
Signature:	Date