

## **EMPLOYMENT APPLICATION**

This facility is committed to the provision of equal employment opportunities to its applicants. This application is intended to allow you to provide your organization with information from which your stability for the position(s) for which you are applying can be determined.

Auvertisein	ent $ \cup $ Frien	$u$ / nelative $\cup$ Walk-in $\cup$	Employ	ment Agency	○ Website ○ Oth	ner:		
Last Name:			First Name:			М	l:	
			City	City:		State: Zip:		p:
Phone#:		Cell#:	]-	Email:				
Which locat	ion are you ap	plying for?			Location:			
Are you 18 years or older?							······	YES \( \cap \) NO
					YES NO Dates:			
Are you curr	ently employe	d?					C	YES ONO
May we con	tact your pres	ent employers?					C	YES ONO
Are you prev	ented from la	wfully becoming employed	in this co	untry because	of Visa			
or Immigrat	ion Status? (	Proof of Citizenship is required at hire	<u>:</u> )				C	YES ONO
On what date would you be available to start?					Dates:			
What is you	availability?				(	Part-Time 🔘	Full-Time (	Temporary
Are you curr	ently in 'Lay C	ff' status and subject to reco	all?				C	YES ONO
School Level	Name & Location of School			Years Completed	Course of Study (if applicable)			Degree Diploma
High School								
College University								
Other (Specify)								
		business, or civic activities ancestry, disability, or other p			may exclude member	ship which wou	uld reveal <u>g</u>	gender, race,
Re	ferences: Plea	se give the names of three inc	dividuals	you are not rela	ited to, whom you ha	ve known at led	ıst one yea	ır.
Re: Nam		se give the names of three inc		you are not rela	nted to, whom you have	ve known at lea		nr. none #

ship which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status. Contact Person: \_ Company Name: \_\_\_ \_\_\_\_\_\_ Phone#: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_ Hourly Rate/Salary: \_\_\_\_\_ Work Responsibilities: Company Name: \_\_\_ \_\_\_ Phone#: Dates of Employment: Position: Reason for Leaving: \_\_\_ Hourly Rate/Salary: \_\_\_\_\_ Work Responsibilities: \_\_\_\_ List any other experience that may be an asset to Rumford Pet Center: ○ First Aid ○ Retail Sales ○ Animal Care ○ Other Have you been convicted of a felony? **If yes, please explain:** (Will not necessarily exclude you from consideration) APPLICANT CERTIFICATION PLEASE read these statements carefully before signing. Your signature will indicate that you understand the statements and agree to be bound by there terms. I certify that answers given herein, and on any attached material, are true and complete to the best of my knowledge. I understand that falsification of any information given on this application, or during the interview process is grounds for dismissal in accordance with Rumford Pet Center policies and procedures. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I release all parties from all liability for any damage that may result from the information received during this investigation. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Rumford Pet Center is of an 'at will' employment relationship and may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the President and Director of Human Resources. Signature of Applicant: \_\_\_

Work/Experience: Please start with your present or last job Include any job-related military serivice assignments. You may exclude member-