



NEFFSVILLE VETERINARY CLINIC
APPLICATION FOR EMPLOYMENT
(Please Print Clearly)



An Equal Opportunity Employer

We do not discriminate on the basis of race, religion, national origin, color, sex, age, veteran status, sexual orientation, or disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job-related factors.

Personal Information:

Name: _____
Last First Middle

Present Address: _____
Street Number City State Zip

Telephone Number (Home): _____ Telephone Number (Cell): _____

Email Address: _____

Position Applying For: _____ Rate of Pay Expected \$ _____ per week

Hours Desired: Full-Time Part-Time

If Part-Time, specify days & hours available:

Were you previously employed by Neffsville Veterinary Clinic? _____ If yes, when? _____

List any friends or relatives working here: _____

If you are hired, what date are you available to start the position? _____

List work experiences, skills, or qualifications that you feel would help you in the desired position?

Are you 15 years of age or older? Yes No

If hired, can you furnish proof you are eligible to work in the United States? Yes No

Have you ever been convicted of a felony? Yes No


If Yes, Please Explain: _____
A "yes" answer does not automatically disqualify you from employment since the nature of the offense, date, and the job for which you are applying will be considered.

Have you previously applied here? Yes No

If Yes, When: _____

Have you worked for any company under a different name? Yes No

If Yes, Please Explain: _____

 **Personal References:** (not former employers or relatives)

Name & Occupation	Address	Phone Number

 **Membership in Professional or Civic Organizations:** (do not include racial, religious, or nationality groups)

Name or Description of Organization	Dates	Offices Held

 **Education History:**

Name of School	Degree Awarded	Grade Average	Honors
High School:			
College or University:			
Other (Business, Trade, Etc.):			

Are you proficient on the keyboard?

Yes

No

Do you have any experience with Microsoft Word or Excel

Yes


No

Do you have any experience with any veterinary software?

Yes

No

If Yes, Please Explain: _____

 **Work History:** (Please begin with the most-recent position, list all past employers including any pertinent military experience)

Name of Company:	Business Address:	Phone Number:
Type of Business:	Immediate Supervisor:	Dates Employed: From: _____ To: _____
Exact Job Title:	Earnings: At hire: _____ At Termination: _____	Reason for Termination:

Description of Duties:

Name of Company:	Business Address:	Phone Number:
Type of Business:	Immediate Supervisor:	Dates Employed: From: _____ To: _____
Exact Job Title:	Earnings: At hire: _____ At Termination: _____	Reason for Termination:

Description of Duties:

Name of Company:	Business Address:	Phone Number:
Type of Business:	Immediate Supervisor:	Dates Employed: From: _____ To: _____
Exact Job Title:	Earnings: At hire: _____ At Termination: _____	Reason for Termination:

Description of Duties:

Name of Company:	Business Address:	Phone Number:
Type of Business:	Immediate Supervisor:	Dates Employed: From: _____ To: _____
Exact Job Title:	Earnings: At hire: _____ At Termination: _____	Reason for Termination:

Description of Duties:

Affidavit

I certify that all information I have provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I understand that the employer may request an investigative consumer report from a consumer reporting agency. This report may include information as to my character, reputation, personal characteristics and mode of living obtained from neighbors, friends, former employers, schools, and others. I understand I have a right to make a written request within a reasonable time for the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation. I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer (except as previously notes), past employers and organizations from any legal liability in making such statements. I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or of the without cause and with or without notice. I have read, understand and by my signature consent to these statements.

Signature: _____ Date: _____