

Canine Acres Pet Resort



EST. 2008

CANINE ACRES

PET RESORT AND GROOMING

Employment Application

Today's date: _____

Name: _____ Phone: _____

Address: _____ City: _____ State: _____

Zip: _____ Email: _____

Do you have a current driver's license? _____

How many hours per week would you like to work? _____

Have you ever been convicted of a crime? _____ If yes, please explain:

Day	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Shift times	<input type="checkbox"/> 7-4	<input type="checkbox"/> 7-4	<input type="checkbox"/> 7-4	<input type="checkbox"/> 7-4	<input type="checkbox"/> 7-4	<input type="checkbox"/> 7-4	<input type="checkbox"/> 7-2
	<input type="checkbox"/> 4-9	<input type="checkbox"/> 4-9	<input type="checkbox"/> 4-9	<input type="checkbox"/> 4-9	<input type="checkbox"/> 4-9	<input type="checkbox"/> 8pm-9pm	<input type="checkbox"/> 2-9

We require 2 weekends per month and every other holiday. Does this work for you? Yes No

Are you legally eligible for employment in the US? Yes No

What is your desired wage for this position? _____

If hired, when can you start? _____

EDUCATION

SCHOOLS/COLLEGES ATTENDED	LOCATION (City/State)	# YEARS	DID YOU GRADUATE?	DEGREE
			Yes No	
			Yes No	
			Yes No	

Are you currently attending school? _____

Do you have further education goals? _____

LIST ANIMAL OR ANIMAL RELATED EXPERIENCE

Do you own pets? Yes No

WORK HISTORY Beginning with your current or most recent employer:

Employer: _____ Employment Dates (Month/Year): From: _____ To: _____
Address: _____ City: _____ State: _____ Zip: _____ Phone: _____
Job Title: _____ Supervisor Name: _____
Duties: _____
Reason for Leaving: _____
Salary: Start: _____ End: _____

Employer: _____ Employment Dates (Month/Year): From: _____ To: _____
Address: _____ City: _____ State: _____ Zip: _____ Phone: _____
Job Title: _____ Supervisor Name: _____
Duties: _____
Reason for Leaving: _____
Salary: Start: _____ End: _____

Employer: _____ Employment Dates (Month/Year): From: _____ To: _____
Address: _____ City: _____ State: _____ Zip: _____ Phone: _____
Job Title: _____ Supervisor Name: _____
Duties: _____
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Employer: _____ Employment Dates (Month/Year): From: _____ To: _____
Address: _____ City: _____ State: _____ Zip: _____ Phone: _____
Job Title: _____ Supervisor Name: _____
Duties: _____
Reason for Leaving: _____
Salary: Start: _____ End: _____

May we contact your present employer? _____

References:

Please list two references other than relatives or previous employers.

Name: _____

Name: _____

Company: _____

Company: _____

Telephone: _____

Telephone: _____

Address: _____

Address: _____

Candidate Statement

Please explain why you are the best qualified for a position at Canine Acres Pet Resort:

ADDITIONAL INFORMATION AND CHARACTERISTICS

All positions require employees be able to work at a fast pace, with lots of bending, kneeling and lifting up to fifty pounds during a normal workday shift. Can you do this? Yes No

If no, please explain: _____

Are you willing to take a drug test? Yes No

Please rate yourself below by ability.

GOOD FAIR NONE

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Leadership - Managing others and giving direction |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Detail Oriented - Ability to notice details and take corrective action |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Reliability - Dependable, dedicated and punctual |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Teamwork - Cooperate well with others |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Energy Level - Enthusiastic, self-motivated and positive attitude |

Read & Sign:

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all information contained in the application for employment as may be necessary in arriving at an employment decision.

Signature: _____ Date: _____