

# APPLICATION FOR EMPLOYMENT AT WAGGIN' TAILS JUNCTION

EQUAL OPPORTUNITY EMPLOYER

Date: \_\_\_\_\_

## PERSONAL INFORMATION

Name (Last Name First)			Social Security No.
Address	City	State	Zip Code
Email Address	Home phone #		
Cell phone #	Referred By		

## EMPLOYMENT DESIRED

Position	FULL TIME OR PART TIME	Date You Can Start	Salary Desired
Are you employed?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If so, may we inquire with your most recent employer? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Do you have your own Transportation?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Do you have pets? <input type="checkbox"/> YES <input type="checkbox"/> NO What kind?	

## EDUCATION

NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL			

## GENERAL

Subjects of special interest? Special training skills? Any experience caring for animals? Have you used a computer? On the job or at home?

## FORMER EMPLOYERS (List below last four employers, starting with last one first)

DATE MONTH & YEAR	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
From				
To				
From				
To				
From				
To				
From				
To				

**REFERENCES**

NAME	ADDRESS	BUSINESS	TELEPHONE	YEARS KNOWN

<u>AVAILABILITY</u>	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Available to start work at what time.							
Available to work until what time.							

**AUTHORIZATION**

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal.  
 I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.  
 I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

-----DO NOT WRITE BELOW THIS LINE-----

**REMARKS**

HIRED	FOR DEPT	POSITION	WILL REPORT	SALARYWAGES

APPROVED: \_\_\_\_\_ Date \_\_\_\_\_  
                     Owner or manager