

Charlene's Doggie Day Care EMPLOYMENT APPLICATION

Name _____

Address _____

Home Phone _____ Cell Phone _____ Date of Birth _____

Do you have reliable transportation? _____ Do you have a valid drivers license? _____

Please state days and hours available to work in our daycare facility in Skippack.

Please provide information about animals you currently own, or have owned in the past.

Please provide any professional animal experience you have had in the past, (such as kennel work, dog obedience classes, pet sitting, stable work, etc.)

Please provide 3 references (not relatives) that we may contact who have known you for several years and can attest to your good character.

Name	Address	City/State	Phone	Occupation	Years Known
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Name	Address	City/State	Phone	Occupation	Years Known
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EDUCATION

Diploma / Major

High School _____

Business School _____

Trade School/Technical College _____

WORK EXPERIENCE (List below last four employers with last one first)

Month/Year (From)	Month/Year (To)	Reason for leaving	Position	Wage/Salary
Name/Address of Employer			Supervisor	Phone

Month/Year (From)	Month/Year (To)	Reason for leaving	Position	Wage/Salary
Name/Address of Employer			Supervisor	Phone

Month/Year (From)	Month/Year (To)	Reason for leaving	Position	Wage/Salary
Name/Address of Employer			Supervisor	Phone

Month/Year (From)	Month/Year (To)	Reason for leaving	Position	Wage/Salary
Name/Address of Employer			Supervisor	Phone

Applicant Certification

I certify that all of the statements made in this application are true and correct to the best of my knowledge. I give you and your agents the right to investigate all information given and to secure additional information, if necessary. I hereby release from all liability or responsibility all persons, companies, corporations furnishing such information.

I further understand that the completion of this application does not assure me of employment and does not obligate your company to me in any way.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either the employer or I can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or stat law.

I further understand that this application will be retained for active employment consideration for six months following date of submission. To remain in consideration after that time, it will be necessary that I complete another application.

I further understand that any misleading or incorrect statement or failure to complete any part of this application not prohibited by law may render this application void and if employed would be cause for immediate discharge.

I represent and warrant that I have **read** and fully understand the foregoing, and that I seek employment under these conditions.

Applicant Signature

Date