

# Animal Eye Clinic Employment Application

Programs, services and employment are equally available to everyone. Please inform the interviewing manager if you require reasonable accommodation for the application or interview.

## APPLICANT DATA:

Position Applied for (Please check one)  Receptionist  Technician

Full Name  Last  First  Middle

Address  Street  City  State  Zip

Phone  Home  Mobile  Other  Email

Date Available to Start:  Social Security #:  -  -  Salary Requirement: /hour or year

If you are under 18 and we require a work permit, can you furnish one?  Yes  No

If no, please explain:

Are you a citizen of the United States?  Yes  No If not, are you legally allowed to work in the United States?  Yes  No

Type of employment desired:  Full-Time  Part-Time

Have you ever pled "guilty," "no contest," or been convicted of a crime?  Yes  No

If yes, give dates and details:

\*\*Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.

## SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS:


Previous Employment (begin with most recent)		
Dates of employment: From: _____ To: _____		Position(s) held: _____
Company Name: _____		Address: _____
Phone: _____	Supervisor: _____	May we contact this employer? _____
Responsibilities: _____		Starting salary & Title: _____
_____		Ending salary & Title: _____
Reason for leaving _____		

Previous Employment (begin with most recent)		
Dates of employment: From: _____ To: _____		Position(s) held: _____
Company Name: _____		Address: _____
Phone: _____	Supervisor: _____	May we contact this employer? _____
Responsibilities: _____		Starting salary & Title: _____
_____		Ending salary & Title: _____
Reason for leaving _____		

Previous Employment (begin with most recent)		
Dates of employment: From: _____ To: _____		Position(s) held: _____
Company Name: _____		Address: _____
Phone: _____	Supervisor: _____	May we contact this employer? _____
Responsibilities: _____		Starting salary & Title: _____
_____		Ending salary & Title: _____
Reason for leaving _____		

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application. In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_