

Avenues Pet Clinic Application for Employment

Date _____
Full Name _____
Phone Number _____
Address _____
City, State, Zip _____
Age (if under 18) _____
Social Security Number _____
Driver's License Number _____

Position for which you are applying _____
Start Date _____
Salary Desired (per hour) _____
Are you currently employed _____
If yes, may we contact your current employer? _____
Do you prefer full or part time work? _____
Have you ever been employed by a veterinary clinic or an animal control facility? _____

Highest level of education completed _____
Field of Study _____

Is there any reason you would not be able to work with animals? _____
Have you ever been convicted of possession of an illegal drug? _____
Have you ever been convicted of cruelty to animals? _____
Have you ever been convicted of a misdemeanor? _____
Have you ever been convicted of a felony? _____
*If you answered yes to any of the aforementioned questions, please explain _____

Are you willing to submit to a search of your police records? _____
Are you able to lift at least 60lbs? _____

Employment History _____
Company _____
Company Address _____
Company Phone Number _____
Position _____
Salary _____
Reason for leaving _____
Supervisor _____

Please tell us about your pets
Name _____
Species _____
Name _____
Species _____
Name _____
Species _____
Name _____
Species _____

Please attach resume