

RICKORDS ANIMAL HOSPITAL

1029 E. Harmon Rd
Fort Worth, TX 76131
Phone: (817) 439-4443

APPLICATION FOR EMPLOYMENT

It is the policy of this company to provide equal employment opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, physical or mental handicap or veteran status.

POSITION APPLYING FOR: _____

PERSONAL INFORMATION

First Name _____ Middle Initial _____ Last Name _____

Current Address:

Street and Apt. # _____ City _____ State _____ Zip Code _____

Permanent Address (if different from above):

Street and Apt. # _____ City _____ State _____ Zip Code _____

Telephone: _____ E-mail: _____

Social Security #: _____ - _____ - _____ Driver's License #: _____ State: _____

I am an U.S. Citizen or otherwise authorized to work in the United States on an unrestricted basis: **Yes** **No**

If applicable, please list your visa type, visa # and expiration: _____

Have you ever been convicted of a felony? **Yes** **No**

If you answered yes, please explain:

EMPLOYMENT HISTORY

Present or Most Recent Employer

Employer: _____ Address: _____

Your Position: _____ Salary: _____

Duties: _____

Dates of Employment: _____ to _____

Supervisor: _____ (Name) _____ (Title) May we contact? **Yes** **No**

Reasons for Leaving: _____

Prior Employer

Employer: _____ Address: _____

Your Position: _____ Salary: _____

Duties: _____

Dates of Employment: _____ to _____

Supervisor: _____ (Name) _____ (Title) May we contact? Yes No

Reasons for Leaving: _____

Prior Employer

Employer: _____ Address: _____

Your Position: _____ Salary: _____

Duties: _____

Dates of Employment: _____ to _____

Supervisor: _____ (Name) _____ (Title) May we contact? Yes No

Reasons for Leaving: _____

EDUCATION

High School

(Name and Address)

Did you graduate? Yes No Attended from _____ to _____.

If you did not graduate, did you receive your GED? Yes No

College or University

(Name and Address)

Did you graduate? Yes No Attended from _____ to _____.

Degree: _____ Major: _____

Other: _____

References

Please list the names of three references, to which you are not related to.

Name Address Business Years Known

1. _____
2. _____
3. _____

POSITION INFORMATION

Position Applying For: _____

How did you hear about this job? _____

What hours are you willing to work? _____

Would you be able to work weekends? Yes No

When would you be able to start? _____

Desired salary: _____

I hereby certify that my answers and assertions set forth in this application are true and complete to the best of my knowledge. If I am employed, I understand that any false statements on this application shall be considered sufficient cause for my dismissal. I hereby authorize this company to investigate any aspect of my prior educational, and employment history.

Furthermore I understand that if I am hired, employment with this company is "at will," which means that either the company or I can terminate my employment for any reason not prohibited by state or federal law.

Signature: _____ Date _____