

Application Date : _____

We want to be your family's full-service pet doctors!

Interview Date: _____

EMPLOYMENT APPLICATION

Lyne Animal Hospitals is an Equal Opportunity Employer. Qualified applicants are considered for employment without regard to age, race, color, religion, sex, national origin, marital status, disability, veteran status or other legally protected status. Individuals are judged solely on their job-related aptitude, training, skills, performance and prior experience.

Personal Information: (Please print)

Last Name:	First Name:	Middle Initial:
Social Security #:		
Street Address:	City/State:	Zip:
Preferred Phone #:	Email Address:	

Availability and Desired Position:

Full-Time
 Part-Time
 Flexible Hours/On Call
 Weekends
 Position applied for: _____

Specify hours available for each day of the week.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
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Date you're Available: _____
 Salary Requirements: \$ _____
 Per Hour / Per Year _____
Please circle which is appropriate.

Are you currently employed?
 Yes No
 If so, may we call your current employer?
 Yes No
 How did you hear about us? _____

Have you ever applied to this company before?
 Yes No
 If so, when? _____
 For what position? _____

Have you ever been employed by this company before?
 Yes No
 If so, when? _____
 In what capacity? _____

Employment History: (List your most recent employer first)

Employer:	From: / /	To: / /
Address/Phone No:		
Position / Duties:	Salary \$	Hours/Week
Reason for Leaving:		
Employer:	From: / /	To: / /
Address/Phone No.:		
Position / Duties:	Salary \$	Hours/Week
Reason for Leaving:		
Employer:	From: / /	To: / /
Address/Phone No.:		
Position / Duties:	Salary \$	Hours/Week
Reason for Leaving:		

GENERAL:

Special Job-Related Skills: _____

Job-Related / Civic Activities: _____
(Exclude organization which indicate race, color, sex, national origin, age, disability, marital or veteran's status, or other legally protected status.)

Job-Related Licenses / Certificates Held: _____

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Education:				
	Name and Location of School	# of yrs attended	Did you graduate?	Subjects studied
High School:				
College(s) / Vocational School(s):				
Graduate / Professional				

References: (Give 3 references – not related to you – that have known you longer than 1 year.)				
Full Name	Home / Business Address	Phone Number	Years Known	How Acquainted?

Are you prevented from lawfully becoming employed in this country? Yes No
All new hires are required to supply documentation supporting their authorization to work in the United States within the first 3 days of employment.

Are you at least 17 years of age? Yes No

Have you ever been discharged by an employer? Yes No

If so, please give Employer's Name: _____ Contact Name: _____
 Employer's Address: _____
 Explanation of Discharge: _____

Have you been convicted of a felony or misdemeanor in the past seven years? Yes No
If yes, list conviction(s) that are a matter of public record on another sheet of paper. A conviction is not an automatic bar to employment.

Important Notice and Authorization *Please read carefully before signing*

I hereby authorize *Lyne Animal Hospitals* to thoroughly investigate my background, employment record and other matters related to my suitability for employment. I authorize persons, schools, my current employer and previous employers and organizations contacted by *Lyne Animal Hospitals* to provide any relevant information regarding my application. ***I certify that the facts I've given in this application are true and complete to the best of my knowledge.*** I release all persons, schools, employers of any and all claims for providing such information. ***I understand that misstatements, misrepresentation or omission of facts may result in rejection of this application, or if hired, discipline up to and including dismissal.*** I understand that nothing contained in this application, or conveyed during any interview which may be granted, is intended to create an employment contract. I understand that filling out this form does not indicate there is a position open and does not obligate *Lyne Animal Hospitals* to hire me. I understand and agree that my employment is at will, which means that it is for no specified period and may be terminated by me or *Lyne Animal Hospitals* at any time without prior notice for any reason.

Date: _____ Signature: _____