

APPLICATION FOR EMPLOYMENT

BEAR CREEK ANIMAL CLINIC • 4924 HWY 6 NORTH, HOUSTON, TX 77084 • (281) 463-8091

PERSONAL INFORMATION

NAME DATE

LAST FIRST MIDDLE

ADDRESS ZIP

STREET CITY STATE

PHONE NUMBER

ARE YOU 18 YEARS OR OLDER? YES NO ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES NO

EMPLOYMENT DESIRED

POSITION DATE YOU CAN START SALARY DESIRED

ARE YOU EMPLOYED NOW? IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?

REFERRED BY EVER APPLIED TO THIS COMPANY BEFORE? WHEN?

EDUCATION

	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

SPECIAL SKILLS/ACTIVITIES

U.S. MILITARY OR NAVAL SERVICE PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

RANK

FORMER EMPLOYERS (LIST BELOW LAST 3 EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE START & END	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING

WHICH JOB DID YOU LIKE BEST AND WHY?

REFERENCES (GIVE THE NAMES OF 3 PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR)

NAME	ADDRESS OR PHONE NUMBER	BUSINESS	YEARS ACQUANTED
1.			
2.			
3.			

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMMISIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

SIGNATURE _____