**Crossroads Animal Clinic**

**EMPLOYMENT APPLICATION**

Please fill out the form completely and clearly PRINT all information here except the signature. Applicants may be tested for illegal drugs.

Date\_\_\_\_\_\_\_\_\_\_\_

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last First Middle

Current Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Are you 18 years or older? Yes \_\_\_\_ No\_\_\_\_

Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What position are you applying for? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment desired – Full-time\_\_\_\_\_ Part-time \_\_\_\_\_

For part-time, please indicate hours per week desired \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When can you start? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Salary desired? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you employed now? Yes \_\_\_ No \_\_\_ May we contact your present employer? Yes\_\_\_ No\_\_

Have you ever applied with CAC before? Yes \_\_\_ No \_\_\_

Are you legally eligible for employment in the USA? Yes\_\_\_ No \_\_\_

Have you pled “guilty” or “no contest” to or been convicted of a felony? Yes \_\_\_ No \_\_\_

Have you been convicted of a misdemeanor in the last seven years? Yes \_\_\_ No \_\_\_

If yes to either, please explain. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When are you able to work? Sun \_\_ Mon \_\_ Tues \_\_ Wed \_\_ Thurs \_\_ Fri \_\_ Sat \_\_

Please specify hours each day. \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

We are open Monday through Friday 8am-5:30pm, Saturday 8am-2pm, closed Sunday. You may be required to stay after closing, and to assist with kennels on weekends and holidays.

Addition skills including but not limited to computer, math, typing, supervisory, language, or any other information regarding the career you wish to bring to our attention. Please list veterinary software you have used.

**Education:**

High School Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Diploma Yes \_\_\_ No\_\_\_

College/University Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Diploma Yes\_\_\_ No\_\_\_

Other (Graduate, Technical) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Diploma Yes\_\_\_ No\_\_\_

**References:**

Please list 3 references that you have known for at least 1 year. Do not include relatives.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years known \_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position\_\_\_\_\_\_\_\_\_\_\_\_ Years known \_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position\_\_\_\_\_\_\_\_\_\_\_\_ Years known\_\_\_\_\_\_

**Employment History:**

List your employers starting with your most recent one first. Please include any non-paid/volunteer experience which is related to the job for which you are applying. **Please complete even if you attach a resume.** Be sure that all of your experience or employers related to this job are listed here or use an extra paper if necessary.

**Name of Employer**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_ End Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ May we contact for reference? Yes\_\_ No\_\_

Reason for leaving\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

**Name of Employer**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_ End Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ May we contact for reference? Yes\_\_ No\_\_

Reason for leaving\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Name of Employer**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Start Date \_\_\_\_\_\_\_\_\_\_\_\_\_ End Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ May we contact for reference? Yes\_\_ No\_\_

Reason for leaving\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Why do you want to work at CAC? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe a specific situation where you provided excellent customer service in your most recent position. Why was this effective? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby certify that the information contained on this application, or any other information that I submit to CAC in connection with my application for employment, is true and correct to the best of my knowledge and agree to have any such statements or information checked by CAC. I authorize CAC to make a thorough investigation of my references, past employment, education, criminal background, and to secure additional job-related information about me. I also authorize the references listed above, as well as all other individuals whom CAC contacts, to provide CAC with any and all information concerning my previous employment and any other pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to CAC as well as from any use or disclosure of such information by CAC or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application, or any other information I submit to CAC in connection with my application for employment, may result in my failure to receive an offer, or if I am hired, my immediate dismissal from employment. I understand that filling out this form does not indicate that there is a position open and does not obligate CAC to hire me.

**Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Crossroads Animal Clinic**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please fill out answers to the best of your ability. If you have any questions, please do not hesitate to ask. Thank you and good luck!

1. Have you worked with animals before? If so, please describe your experience.
2. Do you have any pets at home? If so, please list their species/breed/ages and if they are spayed/neutered.
3. Do you participate in any extra activities like volunteering or another job we should know about?
4. Our staff is sometimes needed to rotate kennel duties. Are you available to work occasional weekends and holidays?
5. Ms. Jones comes in for an annual exam and vaccinations for her dog Buster. The exam is $40, Rabies vaccine is $20, Bordetella vaccine is $25, heartworm test is $40, and heartworm preventatives are $55. How much is her total at checkout? How much would her total be if she were to receive a 10% discount?
6. A client is very upset about their bill. How would you take care of the situation?
7. Tell us something about yourself that we wouldn’t know by just looking at you.
8. Please put the following names into correct filing alphabetical order by last name. Write a number by the name in the order in which it goes.

James McGregor \_\_\_\_\_\_\_\_\_\_ Rick Ribart \_\_\_\_\_\_\_\_\_\_

Alice Allen \_\_\_\_\_\_\_\_\_\_ Suzy Que \_\_\_\_\_\_\_\_\_\_

George Vincent \_\_\_\_\_\_\_\_\_\_ Mike Stephens \_\_\_\_\_\_\_\_\_\_

Harold Macmillan \_\_\_\_\_\_\_\_\_\_ Rick Allegory \_\_\_\_\_\_\_\_\_\_

Pat Purkey \_\_\_\_\_\_\_\_\_\_ Steve Stevens \_\_\_\_\_\_\_\_\_\_

Michelle Roberts \_\_\_\_\_\_\_\_\_\_ Rose Kannada \_\_\_\_\_\_\_\_\_\_

Hank Allen \_\_\_\_\_\_\_\_\_\_ Ken Kornell \_\_\_\_\_\_\_\_\_\_

Marian Vance \_\_\_\_\_\_\_\_\_\_ George McDuffy\_\_\_\_\_\_\_\_\_

Paul Purnell \_\_\_\_\_\_\_\_\_\_ Mike Potter \_\_\_\_\_\_\_\_\_\_\_

1. Please correct any misspelling in the following:

Mrs. Clark wanted to bring in her new boxer puppys to see the vetrinarian because they didn’t look like they felt well. In the examanation room, she tells the technition about there diahrrea and vomitting, both puppys are behind on there distemper, parvo viris, and rabies vacines, and both have a slightly high tempurature. The doctor came in and gave the puppys a full physcal exam from head to toe, aksed a few questions, and recomended that they should both have a fecul exam, blood chemestry profile, and urinalisis. The doctor sent them home with a few medacations, and in no time they where feeling much better. Shortly after getting well again, both puppys came in to have there spey and newter surgery and to be microchipped.