

Julington Creek Animal Hospital
12075 San Jose Blvd.
Jacksonville, FL 32223
Phone 904 268-6731 / Fax 904 262-2870

Application for Employment

We are pleased that you are seeking employment with Julington Creek Animal Hospital. Applicants are considered without regard to race, color, religion, sex, age or national origin, or any factors prohibited by local, state, or federal law.

Julington Creek Animal Hospital is a drug free workplace. Pre-employment drug testing is required.

PERSONAL

Date: _____

Last Name _____ First Name _____ M.I. _____

Address Street _____ Apt. _____ City _____ State _____ Zip Code _____

Home Telephone Number _____ Mobile Telephone Number _____ E-Mail Address _____

Are you related to anyone presently employed at our company? Yes No

Name: _____

Have you ever been employed here? Yes Dates: _____ No

Who referred you to us? _____

Why are you interested in working here? _____

EMPLOYMENT DESIRED

Position: _____ Date available: _____

Salary Desired: _____ per hour

Are you available to work weekends? Yes No Holidays? Yes No

What days are you available to work? _____

What hours are you available to work? _____

Are you interested in Temporary Full-time Part-time Seasonal

EXPERIENCE

List your **last 5 employers**, starting with the most recent, **or go back 10 years**; including military service. Account for all time, including periods of unemployment. Use a separate sheet if necessary.

Dates of Employment: From ___/___/___ To ___/___/___ Position held: _____

Firm: _____ Address: _____

Phone: () _____ - _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary & Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for a reference: Yes No

Dates of Employment: From ___/___/___ To ___/___/___ Position held: _____
Firm: _____ Address: _____
Phone: () _____ - _____ Supervisor: _____ Title: _____
Responsibilities: _____

Starting Salary & Title: _____ Ending Salary and Title: _____
Reason for Leaving: _____

May we contact this employer for a reference: ___ Yes ___ No

Dates of Employment: From ___/___/___ To ___/___/___ Position held: _____
Firm: _____ Address: _____
Phone: () _____ - _____ Supervisor: _____ Title: _____
Responsibilities: _____

Starting Salary & Title: _____ Ending Salary and Title: _____
Reason for Leaving: _____

May we contact this employer for a reference: ___ Yes ___ No

Dates of Employment: From ___/___/___ To ___/___/___ Position held: _____
Firm: _____ Address: _____
Phone: () _____ - _____ Supervisor: _____ Title: _____
Responsibilities: _____

Starting Salary & Title: _____ Ending Salary and Title: _____
Reason for Leaving: _____

May we contact this employer for a reference: ___ Yes ___ No

Dates of Employment: From ___/___/___ To ___/___/___ Position held: _____
Firm: _____ Address: _____
Phone: () _____ - _____ Supervisor: _____ Title: _____
Responsibilities: _____

Starting Salary & Title: _____ Ending Salary and Title: _____
Reason for Leaving: _____

May we contact this employer for a reference: ___ Yes ___ No

EDUCATION

High School: _____ Address _____
of Years Completed _____ Did you graduate? ___ Yes ___ No ___ GED
GPA: _____ Class rank _____
College/University _____ Address _____
of Years Completed _____ Did you graduate? ___ Yes ___ No Degree: _____
Major: _____
Other: _____ Address _____
of Years Completed _____ Did you graduate? ___ Yes ___ No Degree: _____
Major: _____

SKILLS

List any licenses or certifications you hold: _____

Computer Skills (describe) _____

Have you ever been convicted of, pled guilty or nolo contendere (no contest) to a felony crime? _____ Yes _____ No

If yes, give details (a conviction will not necessarily disqualify you from employment):

Can you perform the essential functions of this job, with or without a reasonable accommodation? _____ Yes _____ No

Can you meet the attendance requirements of this job? _____ Yes _____ No

IF HIRED, I WILL PROVIDE PROOF OF MY LEGAL AUTHORIZATION TO WORK IN THE UNITED STATES

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY BEFORE SIGNING

I authorize Julington Creek Animal Hospital (Company) to investigate my background and to obtain information concerning my ability and desirability as a prospective employee. In connection with this investigation, I authorize former employers to release to Company, without liability, any information in their possession relevant to my past performance as their employee. I authorize Company to release such employment information as necessary to those employees and agents of Company who require such information to make a decision with respect to any matter pertaining to my status as an employee.

I understand that, if hired, my employment will be "at will", that is, that Company or I can terminate my employment at any time, with or without notice, and with or without cause. I also understand that the "at will" nature of my employment cannot be modified except by written agreement signed by the company president.

I certify that the statements made by me herein, and other information given by me pursuant to my becoming an employee of Company, are true, and complete and correct and are made in good faith, and I understand that any misstatements or omissions can lead to immediate dismissal.

If offered employment, I understand I will be required to submit proof of U.S. citizenship or right to work in the United States prior to commencing employment with Company. I further understand that my employment is contingent upon completion and approval of the appropriate background investigations.

I HAVE READ THE ABOVE PARAGRAPHS, UNDERSTAND THEIR IMPORTANCE AND EFFECT UPON MY EMPLOYMENT, AND ACCEPT SAME AS CONDITIONS OF MY EMPLOYMENT WITH COMPANY.

This application, when completed and signed, becomes the property of Company.

Applicant Signature

Date

FOR COMPANY USE ONLY

Date Application Reviewed _____ Reviewed by _____

Date Decline Letter Sent _____

Date Telephone Interview _____ Telephone Interview by _____

Decline ____ Y ____ N Referred for second interview ____ Y ____ N

Date face-to-face interview _____ Interviewed by _____

Date observational interview _____

Decline ____ Y ____ N Date Decline Letter Sent _____

Hire ____ Y ____ N

If offer of employment is extended at time of interview, the offer is to be made contingent upon satisfactory references and background check.

Circle one - I extended a contingent offer of employment **OR** I would like HR to extend the contingent offer of employment

HIRE INFO

Date to Start _____ Time to report _____

Report to? _____ FT or PT? _____

Rate of pay? _____ Advised about scrubs _____

DOB _____ Advised about slip resistant footwear _____