



EMPLOYMENT APPLICATION

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Desired Salary	
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for the Washington County SPCA or any other animal shelter?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

JOB SKILLS

Please list animal or animal related experience or training that might aid the Washington County SPCA in evaluating your qualifications for the position for which you are applying. Use additional sheets if necessary.

Software and computer related experience: Please list any experience you have with spreadsheet, word processing, database, accounting or other software.

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE		
<p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>EQUAL EMPLOYMENT OPPORTUNITY POLICY The Washington County SPCA's policy is to provide equal employment opportunities for all applicants and employees without regard to race, color, religion, sex, physical or mental disability, developmental disability, sexual orientation, national origin, age, or any other protected class including status as a special disabled veteran or veteran of the Vietnam era. Hiring decisions will be based on the qualifications of the applicant to perform the job for which the applicant applies.</p> <p><i>PLEASE READ CAREFULLY BEFORE SIGNING:</i></p> <p>All information provided by me in support of my application for employment is true and correct to the best of my knowledge. I understand that misrepresentation or omissions may be cause for rejection, or may result in my subsequent dismissal if I am hired. I hereby authorize the Washington County SPCA or its representatives to obtain any information related to my work related activities from prior and current employers. This information includes achievement, employment history, job performance, salary history, disciplinary information, and work records. I further give permission to all former employers to release copies of my previous performance reviews and to answer all legal inquiries regarding my records with them. I agree to release all former employers and the Washington County SPCA and their representatives from all liability for providing legal, relevant and accurate information in good faith regarding my employment as a result of inquiries.</p> <p>I further agree not to take legal action against any former employer, the Washington County SPCA, or their representatives for release of all requested information. I further acknowledge that my employment may be terminated, and any offer of employment, if such is made, may be withdrawn, with or without cause, and with or without prior notice, at any time, at the option of the Washington County SPCA or myself.</p> <p>I understand that no representative of the Washington County SPCA has any authority to enter into any agreement for employment for any specified period of time, or assure or make some other personnel move, either prior to commencement of employment or after I have become employed, or to assure any benefits, or terms and conditions of employment, or make any agreement to the contrary to the foregoing.</p>		
<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Signature</td> <td style="width: 40%;">Date</td> </tr> </table>	Signature	Date
Signature	Date	