

# Heritage Pet - Grooming, Boarding, Day Care & Training, Inc.

## Application for Employment

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

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone # \_\_\_\_\_ Email \_\_\_\_\_

Cell phone # \_\_\_\_\_ Cell phone accept text msgs? Yes No

Position for which you are applying? \_\_\_\_\_

Are you either 18 years of age or in possession of a work permit? Yes No

Are you a US Citizen or an alien who is authorized to work in the US? Yes No

Do you fear animals? Yes No

Do you have any pet-related allergies? Yes No

What is the date of your last tetanus booster injection? \_\_\_\_\_

Do you have arthritis or similar conditions? Yes No

Do you have back, elbow, or wrist problems? Yes No

Are you a member of pet-related organizations? Yes No

If so, which?

Describe your past experience with animals and pet grooming.

What did you like about your last/current job?

What did you dislike about your last/current job?

What are your hobbies?

What are your goals one year from now? Five years?

Date of availability? \_\_\_\_\_

Days of the week which you are able to work? S M T W Th F S

Hours which you are able to work? \_\_\_\_\_

Are you able to work overtime? Yes No

Have you ever applied for employment with Heritage Pet Grooming, Inc.? Yes No

Were you ever employed by this company? Yes No

When?

Do you have any relatives that are or were employed at Heritage? Yes No

If so, who?

Can you be bonded (if applicable)? Yes No  
Not Sure  
 Have you ever been convicted of a crime? Yes No  
 Are any felony charges pending? Give details. Yes No

List current/past work experience:

Employer	Manager/Supervisor	Address and Phone	
		From	TO
Position Held	Responsibilities	Date You Held Position	

Employer	Manager/Supervisor	Address and Phone	
		From	TO
Position Held	Responsibilities	Date You Held Position	

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		From	TO
Position Held	Responsibilities	Date You Held Position	

Who referred you for a position here? (list name or circle)  
 Name \_\_\_\_\_ Walk-In Saw an Ad

Please list personal references. Names of adult persons willing to provide professional or character references for you.

1. \_\_\_\_\_  
 Name \_\_\_\_\_ Address \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Relationship \_\_\_\_\_
2. \_\_\_\_\_  
 Name \_\_\_\_\_ Address \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Relationship \_\_\_\_\_
3. \_\_\_\_\_  
 Name \_\_\_\_\_ Address \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Relationship \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_