



STAFFORD ANIMAL HOSPITAL EMPLOYMENT APPLICATION

APPLICANT INFORMATION:

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

WORK AVAILABILITY / POSITION

Full-time Part-time Weekends

Desired Position: Vet Assistant/Kennel Assistant Receptionist Licensed Vet Technician

Desired Wage: _____ per hr Desired Start Date: _____

If hired, can you furnish proof that you are eligible to work in the United States? Yes No

SKILLS AND EXPERIENCE

Office Skills	Yes	No	Clinical Skills	Yes	No
Telephone Skills			Pet Handling		
Appointment Scheduling			Draw Blood		
Computer Skills			X-Rays		
Typing (WPM)			Injections, IVs, etc.		
Estimate Preparation			Anesthesia		
Cashier			Emergency Care		
Other: _____					

EDUCATION

High School/GED _____ Year Graduated/Received GED _____

College _____ Dates Attended ____/____ to ____/____

Major/Concentration _____ Degree Received _____

Professional License/Certification _____

WORK HISTORY (BEGIN WITH MOST RECENT)

Employer: _____ From ____/____ To ____/____

Address/Phone: _____

Duties: _____ Wage:: _____

Reason for Leaving: _____ Hrs/Wk: _____

Employer: _____ From ____/____ To ____/____

Address/Phone: _____

Duties: _____ Wage:: _____

Reason for Leaving: _____ Hrs/Wk: _____

Employer: _____ From ____/____ To ____/____

Address/Phone: _____

Duties: _____ Wage:: _____

Reason for Leaving: _____ Hrs/Wk: _____

May we contact your previous employers? Yes No



**STAFFORD ANIMAL HOSPITAL
EMPLOYMENT APPLICATION QUESTIONNAIRE**

Do you enjoy meeting the public? Yes No

Are you willing to do weekend pet care? Yes No

Are you willing to work holidays? Yes No

Would you have any difficulty lifting a 35 pound dog onto a table four feet off the floor? Yes No

Do you have any physical condition that could 1) limit your ability to perform the job applied for, or 2) be aggravated by the job you have applied for? Yes No

If yes, please explain _____

Do you have any family or friends that have worked here? Yes No

If yes, who _____

Have you ever been discharged by an employer? Yes No

If yes, please complete: Employer _____

Address _____

Reason for discharge _____

Do you own any pets? Yes No

Please List (Name, Breed)

1. _____

2. _____

3. _____

4. _____

Why do you want to work at Stafford Animal Hospital?

What personality traits make you a qualified for this position?

Fringe benefits desired?

CHARACTER REFERENCES: MAY WE CONTACT THE BELOW REFERENCES? YES NO

Name Phone# Business Relationship

1. _____

2. _____

3. _____

I hereby certify that the information contained in the Employment Application & Questionnaire is true and correct to the best of my knowledge. I understand that any misrepresentation, falsification or material omission of information on the application may result in dismissal from employment. Any employment shall be at the will of either party and may be terminated by either party at any time. Any offer of employment is contingent upon my eligibility to work in the United States.

Signature _____ Date _____