

DOGBOY'S DOG RANCH
EMPLOYMENT APPLICATION

Date

/ /

PERSONAL INFORMATION:

Social Security Number ---	Name: Last	First	Middle
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Present Address: Street	City	State	Zip
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Permanent Address: Street	City	State	Zip
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Phone Number:	Fax Number:	Cellular Number:	Private E-mail Address:
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State Name(s) of any Relative(s) working for DogBoy's:

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Please tell us how you learned about DogBoy's or who referred you:

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EMPLOYMENT OBJECTIVE:

Position Desired:	Date Available for Work:	Minimum Pay You would Consider:
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Hours and Availability:

- Full-Time (30-40 hours/week)
- Part-Time (20-29 hours per week)
- Part-Time (less than 20 hours per week)

What days and hours are you available to work?

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Are there any restrictions on your availability to attend work on a regular basis and/or work overtime? Yes No

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Have you ever applied to DogBoy's? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, when? <table border="1" style="width: 100%;"><tr><td style="height: 20px;"></td></tr></table>		Were you interviewed/offered employment? <input type="checkbox"/> Yes <input type="checkbox"/> No

EDUCATION AND TRAINING:

	Name of School	Location (City, State)	Year Completed (Circle One)	Degree Conferred
High School			1 2 3 4	
College(s)			1 2 3 4	
Graduate Work			1 2 3 4	
Other School(s) (trade, etc.)			1 2 3 4	

Major Course(s) of Study: Minor Course(s) of Study:

U.S. Military or Naval Service? Yes No Rank Presently a Member of National Guard or Reserves? Yes No

SPECIALIZED SKILLS AND KNOWLEDGE:

List any achievements or activities that you consider relevant to your ability to perform the job for which you are applying, such as: awards received, memberships or offices held in professional organizations, licenses held, computer languages or software programs, foreign languages (proficiency in speaking and writing), etc.

For Administrative and Clerical Applicants: Please complete all categories that apply.

Typing Speed (WPM)

Do you have Microsoft Office computer experience? (circle one) **yes / no**

If yes, please list specific MS software used (Word, Excel, Power Point, Outlook, etc.)

GENERAL INFORMATION:

Have you been convicted of a felony or are you awaiting trial on a felony (excluding any sealed or expunged conviction)? Yes No

Please explain your conviction or explain the charge: (Note: a conviction will not necessarily disqualify you from employment)

EMPLOYMENT HISTORY:

Are you employed now? Yes No

If so, may we contact your present employer for a reference? Yes No

(Please complete in detail, and list current or most recent employment first.)

Name of Employer:		City	State	Zip
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
From (mo/yr)	To (mo/yr)	Number of Hours Worked Per Week	Monthly/Hourly Compensation	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Job Title	Immediate Supervisor		Phone #	
<input type="text"/>	<input type="text"/>		<input type="text"/>	
Full Name While Employed			Job Duties	
<input type="text"/>			<input type="text"/>	
Did you voluntarily terminate your employment?:			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for leaving:				
<input type="text"/>				

Name of Employer:		City	State	Zip
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
From (mo/yr)	To (mo/yr)	Number of Hours Worked Per Week	Monthly/Hourly Compensation	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Job Title	Immediate Supervisor		Phone #	
<input type="text"/>	<input type="text"/>		<input type="text"/>	
Full Name While Employed			Job Duties	
<input type="text"/>			<input type="text"/>	
Did you voluntarily terminate your employment?:			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for leaving:				
<input type="text"/>				

Name of Employer: **City** **State** **Zip**

From (mo/yr) **To (mo/yr)** **Number of Hours Worked Per Week** **Monthly/Hourly Compensation**

Job Title **Immediate Supervisor** **Phone #** ()

Full Name While Employed **Job Duties**

Did you voluntarily terminate your employment?: Yes No

Reason for leaving:

REFERENCES:

Please provide the names of three people who have supervised you in past employment or other dog care experience.

NAME	ADDRESS	RELATIONSHIP	PHONE NUMBER	YEARS ACQUAINTED
1. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I understand and acknowledge the following:

1. I authorize investigation of all statements contained in this application and any supporting documents. I authorize DogBoys to secure information about my experience from former employers, educational institutions, government agencies, or any references I have provided, and for those parties to provide information concerning my qualifications for employment, and I hereby release all parties from any liability arising from such investigation. I specifically authorize investigation of my motor vehicle record, criminal record, and consumer credit history.
2. If I am offered employment, I will, as a condition of employment, furnish proof of my identity, that I am over 18 years of age and my legal right to work in the United States.
3. I understand that if I am employed, any false statement, misrepresentation, or omission of facts on this application or on any supporting documents, regardless of when discovered to be false, may result in my immediate dismissal.
4. I agree that, if I am offered employment, I will be required to conform to the rules and standards of the Company.
5. I agree that, if I am offered a position, it will be offered on condition that MY EMPLOYMENT SHALL BE "AT-WILL" AND FOR NO DEFINITE PERIOD, AND THAT MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME BY ME OR DogBoys, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT PRIOR NOTICE.
6. My signature below certifies that I have read, understand, and agree to the foregoing and to the best of my knowledge and belief, the information on the application form is true and correct.

Date: _____ Signature _____

DogBoy's policy is to fill every position without regard to race, color, religion, creed, gender, sexual orientation, marital status, age, national origin, ancestry, physical or mental disability, medical condition, or any other consideration made unlawful by federal, state, or local laws. DogBoys is an equal opportunity employer and selects employees on the basis of ability, experience, training, and character.

Please Note: DogBoy's considers applications for only a 30-day period. If you wish to be considered after 30 days from the date of application, please reapply.