

Yellowstone Valley Veterinary, Inc.
Db
Shiloh Veterinary Hospital
345 Shiloh Road
Billings, MT 59106
406-656-1910 Fax: 406-655-0868

APPLICATION FOR EMPLOYMENT

Date: _____

Name: _____

Address: _____

Street

City

State

Zip

Phone: _____

Email: _____

Position applying for: _____ Rate of pay expected \$ _____

Are you seeking part-time _____ or full-time _____ Phone # _____

If your application is considered favorable, on what date will you be available for work?

Are there any work experiences, skills, or qualifications that you feel would especially fit you for work here?
Please add any additional comments you think are important for us to consider.

Are you 18 years of age or older? _____

Have you previously applied here? _____ If yes, when? _____

Who should we notify in case of an accident? _____

Personal References (not former employees or relatives)

<u>Name and Occupation</u>	<u>Address</u>	<u>Phone Number</u>
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1.

2.

3.

Employment History

List the most recent employer, or last employer, first. Include military service or any self-employed or unemployed periods.

Company

Address

Telephone Number

Date Employed From _____ To _____ Last Salary

Last Supervisor's Name

Is it okay to contact this employer?

Why did you Leave? (*Be Specific*)

Liked Most About Job? (*Be Specific*)

Liked Least About Job? (*Be Specific*)

Company

Address

Telephone Number

Date Employed From _____ To _____ Last Salary

Last Supervisor's Name

Is it okay to contact this employer?

Why did you Leave? (*Be Specific*)

Liked Most About Job? (*Be Specific*)

Liked Least About Job? (*Be Specific*)

Company

Address

Telephone Number

Date Employed From _____ To _____ Last Salary

Last Supervisor's Name

Is it okay to contact this employer?

Why did you Leave? (*Be Specific*)

Liked Most About Job? (*Be Specific*)

Liked Least About Job? (*Be Specific*)

Educational Background

IF YOU ATTENDED HIGH SCHOOL

Name of High School: _____ City and State _____

Graduated? Yes or No

IF YOU ATTENDED COLLEGE

Last College Attended: _____ Graduated? Yes or No

Major Course of Study: _____ Degrees (if applicable) _____

Employment Status

Have you ever been convicted of a felony? Yes or No

If yes, please

explain: _____

Are you currently employed? Yes or No

If yes, is your intent to continue in your current job if you work here? Yes or No

Are you currently a student? Yes or No

If yes, what impact does this have on your availability for work?

Are there any commitments, activities, hobbies, vacation plans, etc. that would affect your ability to work here?

Yes or No

If yes, please explain:

AFFIDAVIT

I certify that all information I have provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE. I have read, understand, and by my signature consent to these statements.

Signature _____ Date _____