

DOGVILLE DAYCARE JOB APPLICATION FO
 (PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE)

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

**Dogville is staffed 24 hours a day, 365 days a year.
 Employees and Managers are expected to be available to
 work shifts on holidays and weekends. Some positions may
 work up to 2 overnight shifts per month.**

PLEASE COMPLETE PAGE 1-4



DATE _____

Applicant Name:

 Last First Middle

Applicant Contact Information:

Email Address: _____

Present Address: _____
 Number Street City State Zip

Cell phone: (____) ____ - _____

Home Phone: (____) ____ - _____

If under 18, please list age _____

Position applied for (1)

When can you start work? _____

How many hours can you work weekly? _____ Can you work **OVER NIGHT**? (10p – 6a) _____

Employment Desired - FULL-TIME ONLY _____ PART-TIME ONLY _____ FULL OR PART-TIME _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. Or Trade School				
Professional School				

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HAVE YOU EVER BEEN CONVICTED OF A CRIME?

___ No ___ Yes (**We do criminal background checks**)

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed and type(s) of rehabilitation _____

DO YOU HAVE A DRIVER'S LICENSE? ___ No ___ Yes

What is your means of transportation to work? _____

Driver's license number _____ State of issue _____

___ Operator ___ Commercial (CDL) ___ Chauffer Expiration Date _____

Have you had any accidents during the past three years? How many? _____

Have you had any moving violations during the past three years? How many? _____

Typing ___ Yes ___ No ___ WPM Word Processing ___ Yes ___ No ___ WPM

Personal Computer ___ Yes ___ No Customer Service Training ___ Yes ___ No ___

Other Related Skills _____

Please list two references other than relatives or previous employers.

Name: _____ Name: _____

Position: _____ Position: _____

Company: _____ Company: _____

Address: _____ Address: _____

Telephone (____) _____ Telephone (____) _____

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WORK EXPERIENCE

Please list your work experience for the past five years beginning with the most recent job you held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer

Address

City, State, Zip Code

Phone Number

Reason for leaving (be specific)

Name of last supervisor	Employment dates	Pay or salary
	From	Start
	To	Final
Your Last Job Title:		

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of Employer

Address

City, State, Zip Code

Phone Number

Reason for leaving (be specific)

Name of last supervisor	Employment dates	Pay or salary
	From	Start
	To	Final
Your Last Job Title:		

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

MAY WE CONTACT YOUR PRESENT EMPLOYER? Yes No

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EMPLOYMENT QUESTIONNAIRE

1. Describe your past experience with animals and/or pet grooming.
2. Are you afraid of certain breeds or sizes of dogs?
3. Do you have any pet-related allergies?
4. What is the date of your last tetanus booster injection?
5. Do you have any pre-existing back, elbow, or wrist problems?
6. What did you like most about your last job?
7. What did you dislike about your last job?
8. What are your hobbies?
9. What are your career goals one year from now? Five years?
10. Are you involved in any pet organizations, shows, or other aspects of the pet industry?

Initial here to indicate that by applying for a job with Dogville Daycare & Boarding, you understand that Dogville is staffed 24 hours a day, 365 days a year. Employees and Managers are expected to be available to work shifts on holidays and weekends. Some positions may work up to 2 overnight shifts per month. _____

Signature _____ Date _____