PET PALACE
EMPLOYMENT APPLICATION

Please print or type your answers to all questions completely and accurately.

Mail completed application to: Pet Palace, 2800 Ole Country Lane, Columbus, OH 43219

IDENTIFICATION

Name *(First)* *(Middle or Init.)* *(Last)*			Date
Street Address *(Number & Street)* *(City)* *(State)* *(Zip)*			
Email Address	Social Security Number		
Phone(s) *(Include best number to be reached during normal business hours)*			
Position Desired	Full- or Part-Time	Date Available	
What days and hours are you available for work? *(List available times)* Su M T W Th F Sa			
Can you, after employment, provide verification of the right to work in the US? ☐ Yes ☐ No	If under age 18, can you provide statement of approval to work from your school and guardian? ☐ Yes ☐ No		
How did you hear about Pet Palace?			
Have you ever been convicted of a criminal offense? ☐ Yes ☐ No If yes, please explain.			
If hired, would you have a reliable means of transportation to and from work? ☐ Yes ☐ No			

EDUCATION

Schools	Names and Locations of Institutions	Major/Minor, Type of Training	Did you graduate?	Type of degree, or certificate
High School				
College				
Graduate School				
Vocational / Technical				

Courses, workshops, seminars, and other specialized or advanced training:

Did you serve in the U.S. Armed Forces? ☐ Yes ☐ No	If "yes," in what branch?	Are you currently in the Reserves? ☐ Yes ☐ No

REFERENCES List below people who know you well, other than relatives, whom we may contact.

Name	Relationship	Phone #
1.		
2.		
3.		

EMPLOYMENT

Please give an accurate, complete full-time and part-time employment record. Start with your present or most recent employer first. If you need additional space, please continue on a separate sheet of paper.

1	Company/Employer	Telephone ( )
	Address	Employed (month and year) From To
	Name of Supervisor	Pay Start Last
	Job Title and Responsibilities	Reason for leaving
		May we contact this employer? ☐ Yes ☐ No
		☐ Part-time ☐ Full-time _____Average hours/week

2	Company/Employer	Telephone ( )
	Address	Employed (month and year) From To
	Name of Supervisor	Pay Start Last
	Job Title and Responsibilities	Reason for leaving
		May we contact this employer? ☐ Yes ☐ No
		☐ Part-time ☐ Full-time _____Average hours/week

3	Company/Employer	Telephone ( )
	Address	Employed (month and year) From To
	Name of Supervisor	Pay Start Last
	Job Title and Responsibilities	Reason for leaving
		May we contact this employer? ☐ Yes ☐ No
		☐ Part-time ☐ Full-time _____Average hours/week

OTHER SKILLS / ACCOMPLISHMENTS

Please list below any additional job-related accomplishments, skills, qualifications or volunteer work that may be applicable to this position:

AGREEMENT AND SIGNATURE

This organization does not discriminate in hiring or employment because of race, color, religion, national origin, sex, or age. No question is intended to secure information to be used for such discrimination.

Please read carefully and sign below.

I hereby certify that answers given by me in this application are true and correct to the best of my knowledge. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

I understand that this employment application and other company documents do not constitute a contract of employment and if hired, I or the company may terminate my employment at any time and for any reason.

Signature_____ Date_____