

# Application for Employment

## Pre-Employment Questionnaire Equal Opportunity Employer

### Personal Information

NAME (First name, Middle initial, Last name): \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

### Employment Desired

Desired Position: \_\_\_\_\_ Available Start Date: \_\_\_\_\_

Are you employed at this time? [  ]yes [  ]no

If so, may we contact your present employer? [  ]yes [  ]no

Are you legally authorized to work in the U.S.? [  ]yes [  ]no

### Educational History

	Name	Location	Did you Graduate?
HIGH SCHOOL			
COLLEGE			
OTHER EDUCATION			

### Veterinary Specific Information

Are you an RVT? [  ]yes [  ]no

Licensed in Texas? [  ]yes [  ]no

Name of RVT School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

How much experience do you have? \_\_\_\_\_ [month/years]

Veterinary Skills/Special Training:

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### References

List three people NOT RELATED to you – whom you have known for at least one year.

Name	Phone Number	Relationship	Yrs. Known

## Employment History

List your last three employers starting with the most recent.

Employer/Company Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Can we contact you employer? [ ]yes [ ]no Salary: \$ \_\_\_\_\_ per \_\_\_\_\_  
Position: \_\_\_\_\_ Employed: [ ]Full Time [ ] Part-Time  
Time Employed: From (month and year) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ To (month and year) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer/Company Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Can we contact you employer? [ ]yes [ ]no Salary: \$ \_\_\_\_\_ per \_\_\_\_\_  
Position: \_\_\_\_\_ Employed: [ ]Full Time [ ] Part-Time  
Time Employed: From (month and year) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ To (month and year) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer/Company Name: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Can we contact you employer? [ ]yes [ ]no Salary: \$ \_\_\_\_\_ per \_\_\_\_\_  
Position: \_\_\_\_\_ Employed: [ ]Full Time [ ] Part-Time  
Time Employed: From (month and year) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ To (month and year) \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

## AUTHORIZATION

This authorizes Animal Hospital of Humble to make inquiries of courts and law enforcement agencies for possible pending charges or convictions.

\*I authorize the Animal Hospital of Humble to check employment references and verify education information provided on this employment application and as disclosed in the interview process.

The Drug Enforcement Agency requires that any person who will have access to controlled substance as a result of his or her status as an employee or agent of Animal Hospital of Humble answer the following questions. Any fals information or omission of information may jeopardize your position with respect to employment. Information revealed by these questions will not necessarily preclude employment or affect continued employment, but will be considered as part of an overall evaluation of your qualifications and job responsibilities. The responses to theses questions will be held in the strictest confidence.

- 1) In the past 5 years, have you been convicted of a felony or within the past two years of any misdemeanor or are you presently charged with committing a criminal offense? (Do not include traffic violations, juvenile offenses or military convictions, except by general court-martial.) NO \_\_\_\_\_ YES \_\_\_\_\_  
If the answer is yes, furnish details of conviction, offense, location, date and sentence. \_\_\_\_\_  
\_\_\_\_\_
- 2) In the past 3 years, have you ever knowingly used any narcotics, amphetamines or barbiturates, other than those prescribed to you by a physician? NO \_\_\_\_\_ YES \_\_\_\_\_ If the answer is yes, please furnish the details. \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date