

McGovern Animal Clinic

Employment Application

Name _____
First middle initial last

Address _____
Street

City/State/Zip

Social Security # ____ / ____ / ____ **DL#** _____ **State** _____

Phone # Home _____ **Cell** _____

E-Mail Address

Position Applied For: **Veterinary Technician** _____ **Technician Assistant** _____
Receptionist _____ **No Preference** _____

Availability Full time _____ **Part time** _____ **No Preference** _____

Are you 18 years or older? Yes No.

Are you able to and willing to work a flexible schedule including evenings, weekends and holidays? Yes No.

Salary Expectations \$ _____

Are you able to lift up to 40 lbs. as part of your daily work? Yes No.

Are you either a U.S citizen or an Alien authorized to work in the U.S.? Yes No

The DEA requires us to ask these questions of every applicant.

1. Within the past five (5) years, have you been convicted of a felony, or within the past 2 years, of any misdemeanor or are you presently formally charged with, or on probation for committing any criminal offence? Yes _____ No _____

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? Yes _____ No _____.

If the answer to either of these question is yes please provide details.

Education:

School	#Yrs completed	Name of School	Course	Did you graduate?
High	_____	_____	_____	_____
College	_____	_____	_____	_____
Other	_____	_____	_____	_____
Other	_____	_____	_____	_____

Employment:

Name of Company _____
Address _____
Phone # _____ Supervisor _____
Date From _____ Date To _____ Title _____
Duties _____

Reason for Leaving _____

Name of Company _____
Address _____
Phone # _____ Supervisor _____
Date from _____ Date To _____ Title _____
Duties _____

Name of Company _____
Address _____
Phone # _____ Supervisor _____
Date from _____ Date To _____ Title _____
Duties _____

Reason for Leaving _____

Name of Company _____
Address _____
Phone # _____ Supervisor _____
Date from _____ Date To _____ Title _____
Duties _____

Reason for Leaving _____

References: Please provide 3 business references

Name _____ **Phone #** _____
Business _____ **Years Known** _____

Name _____ **Phone #** _____
Business _____ **Years Known** _____

Name _____ **Phone #** _____
Business _____ **Years Known** _____

By signing this application I state that the information provided is true to the best of my knowledge. I understand that if I am offered a position and the information I provided is found to be fraudulent, it would be considered grounds for immediate termination.

Signature.

Date.