## **Employee Application**

## Highlands Animal Hospital

1.	APPLICANT INFORMATION	Position applying for: Tech/ Assi	stant/ Receptionist
Full	Name:		
Hom	e Address:		
City/	State/Zip:		
Phon	ne Number:		
Socia	Il Security Number:		
<b>2</b> . Ho	w where you referred to us :		- William & Bibble
<b>3.</b> Ar	e you at least 18 years old?Yes	_No	
<b>4</b> . Are	e you willing to work any shift, including nig	thts and weekends?Yes	_No
lf n	no, please state any limitations:	the training the congruence and against the contract of the configuration of the congruence of	1.0
<b>5</b> . If y	ou where offered employment, when wou	ld you be able to begin work?	
6. Ha	ve you ever been convicted of a felony or n	nisdemeanor?NO	
	Yes, I was convicted of	on	(date)
in	(city)	_(state)	
<b>7</b> . ED	UCATION:		
Hig	h school:	Did you graduate? <b>Yes</b>	No
Col	lege/ University :	Did you graduate? <b>Yes</b>	No
8. REF	FERENCES:		
Nar	me:Pt	none Number	ter sy t kroa
Rela	ationship		
Nar	ne:P	none Number	
Rela	ationshin		

Date of employment	from	to	Position Held:		
Employer Name:	7.7				
Supervisor Name:		May	we contact this emp	olyer:Y/N	
Address:					
Responsibilities:			,		
***************************************					
Salary and Title:					
Reason for Leaving:					· i
Date of employment	from	to	Position Held:		
Employer Name:	<del>all free free and the first of the first of</del>	eritari di inggenerin di dinangkendani di d	**	e 3	
Supervisor Name:	14 °	Ma	y we contact this emp	oolyer:Y/N	
Address:					
Responsibilities:		and a state of the	And the second s		
Salary and Title:	\$ 4 x 1	and the second s	Syrve a second s		
Reason for Leaving:					
0. SUMMARIZE YOUR SI	PECIAL SKIL	LS OR QUAI	LIFICATIONS:		
	231				
99		The second of the			
1. I certify that my answ					rize Highlands
nimal Hospital to make	any investi	gations and	inquires of my perso	nai information.	
pplicant Signature:			Date:		