

Santa Cruz Veterinary Clinic **EMPLOYMENT APPLICATION**

APPLICANT INFORMATION				
Name:				
Phone:		Phone #2:	Email:	
Current address:				
City:		State:	ZIP Code:	
EMPLOYMENT INFORMATION				
Current Employer:			Date of Hire;	
Supervisor:	Job Title:		Phone:	
City:		State:	ZIP Code:	
Position:		Starting Salary:	Ending Salary:	
Reason for leaving?				
May we contact your previous supervisor for a reference? □Yes □No				
Previous Employer:			Date of Hire;	
Supervisor:	Job Title:		Phone:	
City:		State:	ZIP Code:	
Position:		Starting Salary:	Ending Salary:	
Reason for leaving?				
May we contact your previous	superviso	r for a reference? □Yes □No		
Previous Employer:			Date of Hire;	
upervisor: Job Title:			Phone:	
City:		State:	ZIP Code:	
Position:		Starting Salary:	Ending Salary:	
Reason for leaving?				
May we contact your previous supervisor for a reference? □Yes □No				
REEFFERENCES				
Name:				
Relationship:		Company:	Phone:	
Name:				
Relationship:		Company:	Phone:	
Name:				
Relationship:		Company:	Phone:	
		BACKGROUND		
Are you a citizen of the United States? □Yes □No If no, are you authorized to work in the U.S.? □Yes □No				
Have you ever worked for this company before? □Yes □No If yes, when?				
Have you ever convicted of a felony? □Yes □No If yes, explain?				
DISCLAIMER AND SIGNATURE				
I certify that my answers are true and complete to the best of my knowledge.				
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.				
Signature of applicant:				Date