



Prescott Valley Pet Clinic
Job Application Form

Instructions: Print clearly in black or blue ink. Answer all questions. Sign and date the form.

PERSONAL INFORMATION:

First Name _____ Middle _____ Last Name _____
Address _____
City _____ State _____ Zip Code _____
Phone Number (____) _____

Are you eligible to work in the United States? Yes ___ No ___

If you are under age 18, do you have an employment/age certificates? Yes ___ No ___

Have you been convicted of or pleaded no contest to a felony within the last five years? Yes ___ No ___
If yes, please explain: _____

POSITION/AVAILABILITY:

Position Applied For _____

Days/Hours Available

Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Saturday ___ Sunday ___

Hours Available: from _____ to _____

What date are you available to start work? _____

EDUCATION:

Name and Address of School - Degree/Diploma - Graduation Date

Skills and Qualifications: Licenses, Skills, Training, Awards

EMPLOYMENT HISTORY:

Present Or Last Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Position Title: _____

From: _____ to: _____

Responsibilities: _____

Salary: _____

Reason for Leaving: _____

Previous Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Position Title: _____

From: _____ to: _____

Responsibilities: _____

Salary: _____

Reason for Leaving: _____

May We Contact Your Present Employer?

Yes _____ No _____

REFERENCES:

Name/Title Address Phone

I certify that information contained in this application is true and complete.

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.

Signature _____

Date _____