

Kimberly Crest Veterinary Hospital & Specialty Services

1423 E. Kimberly Road • Davenport, Iowa 52807 • www.kimberlycrestvet.com • 563.386.1445



APPLICATION FOR EMPLOYMENT

Thank you for applying today! We offer competitive wages and benefits, and equal access to employment, programs, and services to all persons regardless of gender, age, race, national origin, religion, veteran status or disability. Those applicants requiring reasonable accommodation to the application and/or interview process should notify us. You will be notified only if we wish you to proceed through the selection process; you may update and/or check on the status of your application as you wish.

PERSONAL INFORMATION

Date of Application ____/____/____

Name _____ Soc.Sec.# ____ - ____ - ____
Last First M.I.

Address _____
Street City State Zip

Phone # (____) _____ Email Address _____

EMPLOYMENT DESIRED

Position _____ Full Time ____ Part Time ____

Date you can start _____ Wages/Salary desired _____

Can you perform the essential functions of the job? Yes No

If not, what reasonable accommodations would you request? _____

Are you currently employed? Yes No May we contact you at work? Yes No

Have you ever applied to, or been employed by this company before? Yes No When? _____

Where you referred by someone? Yes No Referred by _____

GENERAL INFORMATION

Are you 18 years or older? Yes No

Are you legally eligible for work in this country? Yes No

Do you have a valid driver's license? Yes No

If No, do you have reliable transportation? Yes No

Are you able to meet the attendance requirements of the job? Yes No

Have you been convicted of a crime, excluding misdemeanors or traffic violations, in the last 7 years?

Yes No If yes, please explain _____

(A "Yes" answer does not automatically disqualify you from employment; the nature of the offense, date, and type of job for which you are applying will be considered.)

EDUCATION	Name and Location of School	# Years Attended	Degree Earned	Major
High School				
College				
Trade, Business, Other School				

EMPLOYMENT HISTORY

List below your last three employers, starting with the most recent one first. This section must be completed even if accompanied by a resume.

Date (Month & Year)	Name and Location of Employer	Position	Supervisor Name and Phone Number	Reason for Leaving	May We Contact (Yes/No)
From					
To					
From					
To					
From					
To					

Special skills _____

Any accomplishments or additional information you would like considered _____

REFERENCES

Name _____ Phone (____) _____ Occupation _____ Years known ____

Name _____ Phone (____) _____ Occupation _____ Years known ____

I certify that all of the information submitted by me on this application is true and complete, and I understand that if any false information, omission, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. I also understand that the company is a "drug free" workplace and that I will be required to undergo drug testing before being hired. In consideration of my employment, I agree to conform to the company's policies and procedures, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment, including number of hours and schedule of hours, may be changed, with or without cause, and with or without notice at any time by the company.

 (Signature)

 (Date)