



EMPLOYMENT APPLICATION

Please fill out the form completely and clearly, print all information except signature. Applicants may be tested for illegal drugs. We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap, disability, sexual orientation, national origin, or any other characteristic protected by applicable federal, state, or local laws. . No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on any basis prohibited by federal, state, or local laws. It is our policy not to refuse to hire a qualified individual with a disability because of that person's need for reasonable accommodations provided under the Americans with Disability Act or other applicable laws.

Date _____

Your Name Last _____ First _____ Middle _____

Present Address Street _____ SSN _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

Have you ever been employed under a name other than the one used on this application? Yes ____ No ____

Are you 18 years of age or older? Yes ____ No ____ How did you hear about us? _____

What position are you applying for?

Employment Desired ____ Full Time Only ____ Part Time Only ____ Full or Part Time

For Part Time, Please indicate hours per week desired. _____

Are you able to perform the essential functions for which you are applying with or without accommodation?
____ Yes ____ No

When can you start _____ Salary desired? _____

Are you employed now? ____ Yes ____ No May we contact your present employer? ____ Yes ____ No

Have you ever applied with Southern Hills Animal Hospital before? ____ Yes ____ No

Are you legally eligible for employment in the US? ____ Yes ____ No

All new hires will be required to provide proof of eligibility to work in the USA.

Have you ever pled "guilty" or "no contest" to or ever been convicted of a felony or are you presently/formally charged with committing a criminal offense? ____ Yes ____ No If yes, furnish details. _____

Have you been convicted of a misdemeanor in the last 7 years? ____ Yes ____ No

Have you ever been terminated from a job because of stealing or other criminal conduct? ____ Yes ____ No

Would you agree to, and pass a random drug test? ____ Yes ____ No

Employment Application Continued



Please list any additional skills including but not limited to computer, math, typing, supervisory, language, or any other information regarding the veterinary field you wish to bring to our attention below. Also list veterinary software you have used.

EDUCATION		
<u>High School Name</u>	<u>Address</u>	<u>Diploma</u> ___ Yes ___ No
<u>College/University</u>	<u>Address</u>	<u>Degree Received</u>
<u>Other (Graduate/Technical)</u>	<u>Address</u>	<u>Degree Received</u>

References

Please list 3 professional references that you have known for at least 1 year. Do not include relatives or spouse.

Name _____	Address _____	Phone _____
Company _____	Position _____	Years Known _____
Email _____		
<hr/>		
Name _____	Address _____	Phone _____
Company _____	Position _____	Years Known _____
Email _____		
<hr/>		
Name _____	Address _____	Phone _____
Company _____	Position _____	Years Known _____
Email _____		



Employment History List your employers, starting with your most recent one first. Please include any non-paid/volunteer experience which is related to the job for which you are applying. Please complete even if you have a resume. Be sure all your experience or employers related to this job are listed here. Use an extra sheet of paper if needed.

Employer _____	Address _____	
Start Date _____	Job Title _____	Supervisor _____
End Date _____	Phone Number _____	May we contact ____Yes ____No
Reason for Leaving _____	Starting Salary _____	Ending Salary _____
List the jobs you held, duties performed, skills used or learned, advancements or promotions while with this company		

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Employment Application Continued



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Why do you want to work for Southern Hills Animal Hospital?

Describe a specific situation where you have provided excellent customer service in your most recent position. Why was the effective?

Did you complete this application yourself? ____ Yes ____ No

I hereby certify that the information contained on this application, or any other information I submit to SHAH in connection with my application for employment, is true and correct to the best of my knowledge and I agree to have any such statements or information checked by SHAH. I authorize SHAH to make a thorough investigation of my references, past employment, education, criminal background, and to secure additional job-related information about me. I also authorize the references listed above, as well as all other individuals whom SHAH contacts, to provide SHAH with any and all information concerning my previous employment and any other pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to SHAH as well as from any use or disclosure of such information by SHAH or any of its agents, employees or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application, or any other information I submit to SHAH in connection with my application for employment, may result in my failure to receive an offer or, if I am hired, my immediate dismissal from employment. I understand that by filling out this form, it does not indicate that there is a position open and does not obligate SHAH to hire me.

I understand that if I am hired by SHAH, my employment will be "at-will" and, just as I would be free to resign at any time, SHAH reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no employee or representative of SHAH has any authority to enter into a contract of employment, express or implied, that changes or modifies in any such employment at-will.

Signature _____

Date _____

Please fax this application to the number below or mail to:

Kris Andrews, Practice Manager 641 Bert Kouns Ind. Loop, Shreveport, LA 71118