

Employment Application

Please complete and email to Megan@Pawlins.com

PERSONAL DATA								
Last Name	First Name	Middle	Middle		Date			
Street Address				Position Desired				
City	State	Zip		Salary Desired				
Home Phone	Other Phone (Work, Cell, etc.)	Personal Email Address		Date Available				
Would you prefer Full time? □	or Part time □		Source of referral					
Available to Work Weekends & H	lolidays? ☐ Yes ☐ No		Days of Week & Hours Available					
Are you able to legally work in the	e United States? ☐ Yes ☐ No							
Have you ever been convicted of any crime or misdemeanor other than a parking violation? Yes No If "yes" please explain including date, charge and disposition (failure to do so could be grounds for immediate dismissal).								
Do you consent to a criminal background check? ☐ Yes ☐ No								
(Conviction record will not necessarily bar employment)								
I understand that any offer of employment is contingent upon my presentation of one or more of the original documents required by the Immigration Reform and Control Act of 1986. Furthermore, I understand that should I not present these original documents on or before my first day of work, the actual commencement of my employment will be delayed until I provide this documentation.								
EMPLOYMENT HISTORY Please give accurate, complete full-time and part-time employment history, starting with the present or most recent employer.								
Company Name	Position/Title	Position/Title						
Address	Employed (month & From To	year)	Salary Start	Last				
Manager or Supervisor	Phone	Reason for leaving	Reason for leaving					
May we contact this person?	Yes 🗆 No							
Describe duties								
Company Name		Position/Title	Position/Title					
Address		Employed (month & From To	year)	Salary Start	Last			
Manager or Supervisor	Phone	Reason for leaving						
May we contact this person?	Yes □ No	<u> </u>						
Describe duties								



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Company Name	Position/Title	Position/Title						
	Employed (mon	Employed (month & year)						
Address	From To)	Start	Last				
Manager or Supervisor Phone	Reason for leav	Reason for leaving						
		Ü						
May we contact this person?								
Describe duties								
EDUCATION								
School (Name	Course of Study	Voore com	nlatad	Did you graduate or	Degree or Diploma			
and Location) Most Recent	Course of Study	Years com	pietea	receive GED?				
WOSt Necent								
Prior School								
Other (Trade or Business)								
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MILITARY SERVICE								
Active U.S. Military History (Do not include ROTC at Branch of Service	nd Active Duty for Tra	aining) rom		То				
Branch of Service	ı	10111		10				
Grade or Rank at Discharge	C	occupational S	Specializ	ation				
Other Training (not shown on above. Include military service schools and indicate dates, names, and address.)								
REFERENCES								
Academic, Business, and Professional. (Give name, title, affiliation, complete address, and phone number)								



Employment Application

Questionnaire
Tell us about you, please complete the following questions:
Do you have any special training or education concerning animals?
Do you have any prior Employment in the Pet Care industry?
Do you have animals living in your home? How do you discipline them? Please write a little about them
Have you ever cared for an animal that was not your own?
Have you ever dealt with an animal with a medical emergency or injury? Please describe
Have you ever been in a situation with an aggressive or fearful animal?
Do you have any physical limitations that might limit your physical contact with the dogs or cats? Are your fearful of
dogs or cats?
W/L
What are your personal hobbies?
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- I authorize Pawlins to investigate my record, including any of the information contained in this employment application except where my written statement specifically requests that no reference be made.
- I understand that nothing contained in this employment application, or in any oral representations made to me during the interview process, may create an employment contract between Pawlins and me. If an employment relationship is established, I understand that I have the right to terminate my employment at any time, with or without notice and with or without cause, and that Pawlins retains a similar right.
- 3. I hereby attest under penalty of perjury that I am authorized to work in the United States.
- 4. By signing this application, I affirm that the information given by me in this employment application is accurate and complete; I understand that any falsification will be considered grounds for dismissal.

Applicant's Signature	Date

It is the policy of Pawlins to provide equal employment opportunity to all individuals without regard to race, color, religion, sex, affectional or sexual orientation, national origin, age, disability, alienation, marital status, familial status, genetic information, atypical hereditary cellular or blood trait and liability for service in the Armed Forces. Pawlins will provide reasonable accommodations for otherwise qualified individuals with disabilities.