



Seattle Veterinary Associates, Inc., P.S.

Application for Employment

Personal Data

Last Name	First Name	Middle Init.
Present Address	City	State, Zip Code
		Telephone Number

Employment Desired

Position Desired	Date You Can Start	Salary Desired
Are you employed?	If so, may we inquire of your present employer?	
Ever applied to this company before?	Where?	When?
How did you hear about the position? Employee Referral <input type="checkbox"/> Ad <input type="checkbox"/> School <input type="checkbox"/> _____ Other (explain)	Are you authorized to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> You must be able to document that you are authorized to engage in employment in the U.S. upon hire.	

Education

High school name and location	Graduated? Yes <input type="checkbox"/> No <input type="checkbox"/>	Subjects Studied	Rank in class ___ of ___	GPA _____
College name and location	Date graduated	Degree/Major	Rank in class ___ of ___	GPA _____
Trade, Business or Correspondence School name and location	Date graduated	Degree or Certification	Rank in class ___ of ___	GPA _____

General

Subjects of special study or research work:

Please list other qualifications or experience gained in professional organizations, school, community activities or volunteer service which relate to your ability to perform the job for which you are applying. (You may exclude all information indicative of race, color, religion, sex, sexual preference, age, national origin, ancestry or disability.)

Have you ever been convicted of a felony? Yes No

If yes, give date, charge, and any appropriate details. A conviction record will not necessarily be a bar to employment.

Green Lake Animal Hospital
6857 Woodlawn Ave NE
Seattle, WA 98115
(206) 524-6540

Northwest Veterinary Hospital
4922 Stone Way N
Seattle, WA 98103
(206) 545-4255

Ravenna Animal Hospital
4541 Union Bay Place NE
Seattle, WA 98105
(206) 522-2114

Queen Anne Animal Clinic
1800 Queen Anne Ave N
Seattle, WA 98109
(206) 284-2148

Employment Experience

List below your last three employers, beginning with the most recent.

1. Name of Employer	Description of position and duties	From mo/yr	To mo/yr
Telephone / address	Starting salary	Reason for leaving	
Name / Title of immediate supervisor	Ending salary	Number of hours per week:	
2. Name of Employer	Description of position and duties	From mo/yr	To mo/yr
Telephone / address	Starting salary	Reason for leaving	
Name / Title of immediate supervisor	Ending salary	Number of hours per week:	
3. Name of Employer	Description of position and duties	From mo/yr	To mo/yr
Telephone / address	Starting salary	Reason for leaving	
Name / Title of immediate supervisor	Ending salary	Number of hours per week:	
May we ask all above employers for references? Yes <input type="checkbox"/> No <input type="checkbox"/>	Which job has given you the most satisfaction and why?		

Professional Certificates and Licenses

Title	Number	Expiration Date
Title	Number	Expiration Date

References

List below three individuals who can provide information regarding your employment and/or educational background.

Name and address	Telephone number	Title / Company	Years Known

Authorization and Release

Read carefully before signing below.

I authorize Seattle Veterinary Associates to verify information related to my education and employment, and release from liability all persons or entities collecting such information. I understand that my employment is not guaranteed for any specific duration, and, further, I understand that neither language contained in any company documents nor any representations made by the employer or other employees, whether orally or in writing, may be construed as altering the actual nature of my at-will employment. I hereby certify that the information provided in this application is accurate and complete. I understand that any misrepresentation or omission may disqualify me from consideration for employment or may lead to my termination, if hired.

Signature

Date