

PRE-EMPLOYMENT APPLICATION

Phoenix Central Laboratory for Veterinarians, Inc. is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status or any disability as provided in the Americans with Disabilities Act. This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered. (The application will remain active for 90 days.)

PERSONAL:

Name: _____ Date _____/_____/_____

Home Phone: (____) _____

Message Ph: (____) _____

Last First Middle

Present Address: _____

Street / Apt# City State Zip

Are you at least 18 years old? Yes No

Are you legally authorized to work for any employer in the US? Yes No

If you work for Phoenix, will you require visa support? Yes No

Have you ever been convicted of any crime (excluding minor traffic violations) including driving while under the influence of alcohol or drugs? Yes No

If yes, explain _____

Note: A conviction will not necessarily disqualify you from employment.

Drivers License: State _____ Type _____ Currently Valid? Yes No

EMPLOYMENT DESIRED:

Are you seeking Full-time Part-time Temporary

Position applied for _____ Salary Desired _____

Date Available to Start _____/_____/_____

Have you ever applied our company before? Yes No

Have you ever worked for our company before? Yes No

If your answer to either question was yes, state when and where you applied and/or worked?

How did you learn of our company and/or position? _____

Do you have any relatives working for us? Yes No

If so. Who? _____

Are you now, or do you expect to be, working in any other business or job concurrently? Yes No

If yes, may we contact your current/other employer? _____

Are you willing and able to work: Days Evenings Overtime Weekend Nights

Are there any days or hours you would be unable or unwilling to work? Yes No

If yes, please specify those days or hours _____

Are any of your records under a different name? Yes No

If yes, what name _____ @ Company _____

EDUCATION:

Name, Address, Location:	Graduate?	Diploma:
High School:	Yes <input type="checkbox"/> No <input type="checkbox"/>	
College:	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Trade School:	Yes <input type="checkbox"/> No <input type="checkbox"/>	

List and describe any other School or Specialized Training or Certification: _____

SPECIAL SKILLS:

Do you type/keyboard? Yes No Words per minute: _____

Have you had any computer or word processing experience or training? Yes No

If yes, please describe _____

Describe why you are interested in working for us and list any skills or abilities you feel qualify you for the position, including hobbies or related interest: _____

REFERENCES: Give three personal references, not relatives or former employers.

Name: _____ Phone: () _____

Address: _____

Occupation: _____ How long known? _____ years

Name: _____ Phone: () _____

Address: _____

Occupation: _____ How long known? _____ years

Name: _____ Phone: () _____

Address: _____

Occupation: _____ How long known? _____ years



WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

Present or Last Employer: _____
Nature of Business: _____
Address: _____ Phone:() _____
Dates Employed: From _____ To _____ Rate of Pay: _____
Name and Title of Last Supervisor: _____
Title and Job Duties: _____
Reason for Leaving: _____

Previous Employer: _____
Nature of Business: _____
Address: _____ Phone:() _____
Dates Employed: From _____ To _____ Rate of Pay: _____
Name and Title of Last Supervisor: _____
Title and Job Duties: _____
Reason for Leaving: _____

Previous Employer: _____
Nature of Business: _____
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Dates Employed: From _____ To _____ Rate of Pay: _____
Name and Title of Last Supervisor: _____
Title and Job Duties: _____
Reason for Leaving: _____

AFFIDAVIT

- I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge.
- I hereby authorize the Company to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements.
- I agree that, if I am employed, I will abide by all the rules and regulations of the company. I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody in the company is authorized to enter into any written or verbal employment contracts with me for any definite period of time without the express written consent of the president of the company. I also understand that my employment is “at-will” and may be terminated by myself or by the company at any time for any reason or no reason at all, with or without prior notice.
- I understand that all company property must be returned and any indebtedness to the company must be paid on or before my last day of work. I authorize the company to deduct from my final paycheck an amount necessary to satisfy any unpaid obligation.

Signature of Applicant: _____ Date: _____