

Employment Application
(Please Print Clearly)

An Equal Opportunity Employer

We do not discriminate on the basis of race, religion, national origin, color, sex, age, weight, veteran status, or disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job-related factors.

Personal Data

Name _____ Date _____
 First **Middle Initial** **Last**

Permanent Address _____
 Street City State Zip

Phone Number _____ Social Security No _____

Job Interest

Position Applied For _____

Location **Southfield** **Auburn Hills** **Grand Rapids**

Indicate Availability To Work: **Full Time** **Part Time** **Days** **Evenings** **Weekends**

Please remember that this hospital is open 24 hours a day, 7 days a week and we need you to remain flexible/available when possible.

Expected salary/rate of pay at start of position _____

Available To Start _____ Referral Source (how did you find out about us) _____

Have you ever been employed by/applied to Michigan Veterinary Specialists before: **Yes** **No**

Are you legally permitted to work in this country: **Yes** **No**

Are you above the minimum working age of 16: **Yes** **No**

Have you ever been convicted of a felony: **Yes** **No**

If yes please explain _____

A positive response is not an automatic bar to employment with the company. The offense for which the person was convicted in relation to the position to which they have applied will be considered.

Education Record

Type	Name and Location	Courses Taken	Graduated		
			Yes	No	Enrolled
High School					
College or University					
Business, Trade, Technical					
Other					

List continuing education courses or seminars attended in the past 18 months:

List the states in which you are licensed to practice along with license numbers:

Employment History
(List previous employers beginning with most recent)

Company Name _____ Business Type _____

Address/Phone Number _____

Supervisor _____ Supervisor Title _____

Position _____ Full Time Part Time Temporary

Employment Dates (mm/yy): From ___/___/___ To ___/___/___ Ending Salary: _____

Reason for Leaving: _____ May we contact: Yes No

Company Name _____ Business Type _____

Address/Phone Number _____

Supervisor _____ Supervisor Title _____

Position _____ Full Time Part Time Temporary

Employment Dates (mm/yy): From ___/___/___ To ___/___/___ Ending Salary: _____

Reason for Leaving: _____ May we contact: Yes No

Company Name _____ Business Type _____

Address/Phone Number _____

Supervisor _____ Supervisor Title _____

Position _____ Full Time Part Time Temporary

Employment Dates (mm/yy): From ___/___/___ To ___/___/___ Ending Salary: _____

Reason for Leaving: _____ May we contact: Yes No

References

(Please list three professional references below)

Name	Company and Title	Business Telephone	Home Telephone

I certify that all information I have provided in this application and/or attached resume or CV is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I understand that the employer may request an investigative consumer report from a consumer reporting agency. This report may include information as to my character, reputation, personal characteristics and mode of living obtained from neighbors, friends, former employers, schools, and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation. I authorize the investigation of any or all statements contained in this application to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE. I have read, understand, and by my signature consent to these statements.

Applicant Signature: _____

Date: _____