



ANGELS for ANIMALS

4750 State Route 165 • Canfield, OH 44406 • 330-549-1111 • Fax: 330-549-5708

www.angelsforanimals.org

Angels For Animals is an equal opportunity employer and does not discriminate against applicants or employees on the basis of gender, race, color, religion, national origin, ancestry, age, disability, sexual orientation or marital status.

PLEASE PRINT

Name: _____ Date of Application: _____

Address: _____ City: _____ ST: _____ Zip: _____

Home Phone : _____ - _____ - _____ Cell/Alternate phone: _____ - _____ - _____

Are you over 18 years of age? Yes No

Have you ever filed an application with us before (when)? _____

May we contact your current employer (how)? _____

What type of position do you desire? _____

Wage or Salary required: _____ Date available to start: _____

How were you referred to us? _____

Are you willing to work an irregular schedule, overtime, different shifts, and/or weekends? Yes No
If no, please explain:

Do you have access to adequate transportation to travel to and from work? _____

Have you ever worked or volunteered at a non-profit organization? _____

Do you have any pets; are they spayed or neutered? _____

If hired, proof of your identity and employment eligibility in the United States must be established by appropriate documentation at the time you begin work.

Do you have an original Social Security card and picture identification? Yes No

Have you ever been convicted of a violation of the law other than a minor traffic violation? Yes No
(Answering yes will not automatically bar you from obtaining a position.)

If yes, explain: _____

Education and Skills:	Number		
<u>Name and Address</u>	<u>Years Completed</u>	<u>Graduated</u>	<u>Degree/Major</u>
High School _____			
Technical School _____			
College _____			
Other _____			
Specify Honors, Certifications, Licenses, etc.: _____			

Any plans for continued education? _____			
Specify computer literacy and other applicable skills: _____			

Employment and Volunteer Activities:
 Start with your present or most recent experience. Include military service and volunteer activities. You may exclude organizations which indicate age, race, color, religion, gender, national origin, disability or other protected status.

Employer:	Position:	
Address:	Dates Employed- from:	to:
Supervisor:	Hourly Rate/Salary-start:	end:
Phone:	Duties:	
Reason for leaving:		
Was your departure voluntary or involuntary?		

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Employer: Position:
Address: Dates Employed- from: to:
Supervisor: Hourly Rate/Salary-start: end:
Phone: Duties:
Reason for leaving:
Was your departure voluntary or involuntary?

Describe any experience or qualifications which best relate to the position for which you are applying:

Applicant's Statement:

I certify that the answers provided above are accurate to the best of my knowledge and belief. I am aware that failure to complete this application, intentional omissions or misstatements may result in the refusal of employment or discharge.

Public Law 91-508 requires that we advise you that a routine inquiry may be made during our initial or subsequent processing which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of the inquiry, if one is made, will be provided.

I hereby acknowledge that I have read the above statement and understand it.

Signature of Applicant

Date

Notice to Applicant:

You are informed that this application is merely an application to secure employment and at no time is to be considered as a contract of employment. Further, if employment is extended to you and you accept the same, it must be understood by you that you must comply with all Rules and Regulations of the organization. If hired, employment will be for no definite period and may, regardless of the date of payment of wages, be terminated at any time without previous notice and with or without reason, at the will of either the employee or employer.

I have read this Notice to Applicant and fully understand and agree to it.

Signature of Applicant

Date

Authorization to Conduct Background Investigation and Release of Information:

The undersigned hereby grants Angels for Animals, Inc. authority to conduct an investigation of my background, including but not limited to education records, employment records, military records, criminal conviction and traffic records and any and all other records as Angels for Animals, Inc. deems proper and necessary in order to properly assess my character, reputation and background in connection with my application for employment with Angels for Animals, Inc.

I hereby give my permission for any person, business or institution contacted in such investigation to release any and all information properly requested and copies of same, if requested, and do hereby release such person, business or institution from all liability for providing correct information. A photocopy of this authorization shall be as valid as the original.

Signature of Applicant

Date

Type or Print Applicant Name

Social Security Number

Attest:
Angels for Animals, Inc.

Representative of Angels for Animals, Inc.

Date