



Employment Application

The Peninsula Humane Society & SPCA is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, nation origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.

PERSONAL							
Last Name	First		Initial	Social Securit	Social Security #		
Other Name(s) Used				Home Teleph	one #		
Address				Business or M	lessage #		
Position Applied For	Referre	d By		Email Addres	S		
Have you ever interviewed with the Peninsula Humane Society & SPO		If yes, list o	late(s) & job ti	tles:			
Are you applying for: Regular full-time work? Regular part-time work? Temporary/Seasonal work?	Yes N Yes N Yes N	Are you av Are you av Are you av	ailable to work ailable to work de to work diff	k on weekends, cholidays, as ne covertime, as ne erent shifts d shift), if neede	eded? eeded?	Yes Yes Yes Yes	No No No
Do you have any friends or relatives employed by PHS/SPCA	yes N	No If yes, state name(s) and relationship:					
If hired, on what date can you st							
EDUCATION							
EDUCATION Charle Lichard Crando Completed		High School		9 10	11	12	
Check Highest Grade Completed:		riigii School College, Trade Graduate Stud		1 2	3	4	
School	Address Dates		Dates At	Degree, Diplo License or Certi			
High School					LICCIISC	or germice	icc
College/University							
Vocational, Business, Other							
List Any Education or Certification	ons Specifically R	elated to the P	osition Sought	<u> </u>			
Other Special Knowledge, Skills o	or Qualifications						
For Clerical Applicants Only:							
Do you type? Yes No	If yes, WP	M:					
Computer Skills (Hardware/Softv	vare)						

EMPLOYMENT HISTORY

List all employments for the past 10 years, starting with the most recent position. All information must be completed. You may attach a résumé but not in place of completing the required information.

Employed From	Employer Name	Supervisor Name
Employed Until	Employer Address	Supervisor Phone #
/ /		
Job Title		Reason for Leaving
Duties & Responsib	ilities	·
Employed From	Employer Name	Supervisor Name
/ /		
Employed Until	Employer Address	Supervisor Phone #
/ /		
Job Title		Reason for Leaving
Duties & Responsib	ilities	
Daties & Responsio	muco	
Employed From	Employer Name	Supervisor Name
/ /		
Employed Until	Employer Address	Supervisor Phone #
/ /		
Job Title		Reason for Leaving
Duties & Responsib	ilities	
Employed From	Employer Name	Supervisor Name
/ /		
Employed Until	Employer Address	Supervisor Phone #
/ /		
Job Title		Reason for Leaving
Duties & Responsib	ilities	

GENERAL

Voc	NIO	
162	1/1/0	

Are you currently employed?					
May we contact your current employer?					
Have you ever applied to or worked for Peninsula Humane Society & SPCA? If yes, when?					
If hired, can you furnish proof of age?					
If hired, would you have a reliable means of transportation to and from work?					
Have you ever been terminated or asked to resign from any employment? If yes, please explain:					
Will you be able to perform the essential job functions for the position you are applying for with or without reasonable accommodation? If no, describe the functions that cannot be performed:					
(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants & employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)					
If hired, can you present evidence of your US citizenship or proof of your legal right to live and work in the US					
Do you speak, write or understand any foreign language? If yes, which?					
Do you have any other experience, training, qualifications, or skills which you feel make you especially suited for work at Peninsula Humane Society & SPCA? If so, please explain:					
Have you obtained any special skills or abilities as the result of military service? If yes, please explain:					

CERTIFICATION & AUTHORIZATION

Please read carefully, Initial Each Paragraph and Sign Below:
I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. I hereby authorize PHS/SPCA to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release PHS/SPCA, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and PHS/SPCA. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or PHS/SPCA, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the PHS/SPCA's designated representative.
I hereby acknowledge that I have read and agree to the above statements.
Applicant's Signature Date