Application for Employment

Please fill out form completely for employment consideration. Print and mail to Jennifer Fenton, Wundrland Pet Lodge, POB 129 N. Clarendon, VT 05759 when completed.

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or handicap. We are an equal opportunity employer.

Personal Informatio	n		
Last Name	First	Middle	Date
Street Address	Home Phone ()		
City, State, Zip			I
Business Phone () -			Email Address:
What was your previous addre	ss?		How long at present address? Years Months
Are you over 18 years of age? If not, employment is subject	Yes No to verification of minimum	legal age.	How long at present address? YearsMonths
Have you ever applied for emp Yes No If Yes: Month and Year			Social Security No.
How did you learn of our organ	nization?		l
Are you legally eligible for emp	ployment in the United Sta	tes?	When will you be able to work?
Are you employed now?	I	f so, may we inquire o	of your present employer?
Have you been convicted offenses, which has not be Yes, describe in full.			ng misdemeanors and summary court?

		any reasons for which you might r	not be able	to perf	orn	n the job du	ities (with a	a	
		e accommodation)?							
∐ Y	es	☐ No If Yes, please explain.							
D :	т.		C			A ¥7			
Driv	ers Lice	ense#	State			Any Violations? ☐ Yes ☐ No			
				Li fes Li No					
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C	1 1		, (Course	of	No. of	Did you	Degree or	
50	hool	Name and location of school	OI	study		years completed	graduate?	diploma	
Co	llogo	.				completed	 		
	llege						∐ Yes □ No		
Н	ligh						Yes		
1	ugu						No les		
Tı	ade						Yes		
	hool						No		
0	ther						Yes		
							No		
<u> </u>		1	,				1		
Mil	itary								
Com	plete tł	nis section if you served in the U.S. Armed	d Forces		Bra	nch of Service			
					_				
Desc	cribe yo	ur duties and any special training			Period of Active Duty (Month & Year)				
					Fro		То		
				Rank at Discharge					
			Date of Final Discharge						
<u> </u>									
Em	nlovi	ment History Please give accu	ırate com	nlete fu	11_ti	ime and nar	t-time emn	lovment	
		art with present or most recent em		proce ru		ane ana par	t time emp		
		•	1 3						
	Compa	ny Name				Telephone			
1						()	-	
	Addres	ress				Employed (Start Month and Year)			
						From To			
	Name (ame of Supervisor				Hourly Rate			
						Start	La	ıst	
	Start J	tart Job Title and Describe Your Work				Reason for Leaving			
	P.					1			

	Company Name		Telephone				
				()	-		
	Address	ress			Employed (Start Month and Year)		
0				From	То		
2.	Name of Super	visor		Hourly Rate			
				Start	Last		
	Start Job Title a	and Describe Your Work		Reason for Leaving			
	Company Name	е		Telephone			
	A 11			()	-		
	Address			Employed (Start Mo	Employed (Start Month and Year)		
3.				From	То		
3.	Name of Super	visor		Hourly Rate			
				Start	Last		
	Start Job Title and Describe Your Work			Reason for Leaving			
	Company Name	e		Telephone			
	Address			Fordered (Start M			
	nuur CSS			Employed (Start Mo	onth and Year)		
4.				From	То		
	Name of Super	visor		Hourly Rate			
				Start	Last		
	Start Job Title a	and Describe Your Work		Reason for Leaving			
We may contact the employers listed above		Do not contact					
unless you indicate those you do not want us to contact.		Employer Numb	oyer Number(s)				
Con	Reason						
	f erences: Givest one year.	ve below the names of three perso	ons not related	l to you, whom yo	u have known at		
	Name	Address		Business	Years		
1.					Acquainted		
2.							
3.							

e information provided in this Application for Employment is true, correct and complete. If
nployed, any misstatements or omissions of fact on this application may result in my dismissal.
understand that acceptance of an offer of employment does not create a contractual obligation on the employer to continue to employ me in the future.
you decide to engage an investigative consumer reporting agency to report on my credit and ersonal history, I authorize you to do so.
a report is obtained you must provide, at my request, the name and address of the agency so I ay obtain from them the nature and substance of the information contained in the report.
Date Signature

Please complete and mail a copy of this form to:

Wundrland Pet Lodge Attention: Jennifer Fenton POB 129 N. Clarendon, VT 05759 Telephone 802.773.8011