



Canine & Co. Dog Resort EMPLOYMENT APPLICATION

Canine Properties, LLC. dba Canine & Co. Dog Resort (the "Company") is an equal opportunity employer and will not base hiring on race, color, sex, national origin, religion, disability, age, sexual orientation, or any other characteristic protected by applicable federal, state, or local law. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on any basis prohibited by federal, state, or local laws. It is the Company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as provided under the Americans with Disabilities Act or other applicable laws.

Please fill out all areas of this application completely in blue or black ink only. While you are welcome to submit a resume as well, it does not substitute the completion of the application.

Application Date: _____

Name			
Street Address	City	State	Zip
Email Address	Mobile Phone	Home Phone	
In order to permit a check of your work and education records, should e be made aware of any change in name or assumed name that you previously used? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, identify name(s) and relevant dates.			
Do you have any relatives who either currently work or have worked for Canine & Co. Dog Resort? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Please Specify:			
Have you previously applied for employment here? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?			

WORK EXPERIENCE

List your previous experience **(beginning with your most recent position)**.

Employer/Company		Employer/Company	
Address (Street, City State & Zip)		Address (Street, City State & Zip)	
Starting Job Title	Starting Salary/Wage	Starting Job Title	Starting Salary/Wage
Last Job Title	Ending Salary/Wage	Last Job Title	Ending Salary/Wage
Dates Employed (mo./yr.) From: To:	Immediate Supervisor	Dates Employed (mo./yr.) From: To:	Immediate Supervisor
Duties		Duties	
Reason for Leaving <input type="checkbox"/> Voluntary? <input type="checkbox"/> Involuntary?		Reason for Leaving <input type="checkbox"/> Voluntary? <input type="checkbox"/> Involuntary?	
May we contact previous employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		May we contact previous employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer/Company		Employer/Company	
Address (Street, City State & Zip)		Address (Street, City State & Zip)	
Starting Job Title	Starting Salary/Wage	Starting Job Title	Starting Salary/Wage
Last Job Title	Ending Salary/Wage	Last Job Title	Ending Salary/Wage
Dates Employed (mo./yr.) From: To:	Immediate Supervisor	Dates Employed (mo./yr.) From: To:	Immediate Supervisor
Duties		Duties	
Reason for Leaving <input type="checkbox"/> Voluntary? <input type="checkbox"/> Involuntary?		Reason for Leaving <input type="checkbox"/> Voluntary? <input type="checkbox"/> Involuntary?	
May we contact previous employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		May we contact previous employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

EDUCATION AND TRAINING

School	Name, City and State for Each School	Number of Years Completed	Graduated?	Major or Course Type
High School				
College				
Additional Training				

REFERARAL SOURCE – CHECK ONE

CAREER OBJECTIVE

Walk-In Applicant Agency/Organization _____

Friend _____
Name _____

Newspaper Ad Employee Referral

School/College _____
Name _____

_____ *Name* _____

Other _____

Why are you interested in working for Canine & Co. Dog Resort?

APPLICANT'S STATEMENT

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true to the best of my knowledge. I also agree that any falsified information or significant omission may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying information. I hereby agree to submit any lawful drug, integrity, or skills testing that may be required as a condition of employment or continued employment and understand that unless otherwise prohibited by law, refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge. I further agree to submit to search of my person or any locker or work area that may be assigned to me, and I hereby waive all claims for damages on account of such examination. I understand that this application is valid for 6 months; I will reapply after that time if I am still interested in employment. I understand that if I am hired by the Company, my employment will be "at-will" and, just as I will be free to resign at any time, the Company reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no employee or representative of the Company has any authority to enter into a contract of employment, express or implied, that changes or modifies in any way such employment at-will.

With your signature & date, you agree to the terms and conditions stated in application.

SIGNATURE _____

DATE _____