



## APPLICATION FOR EMPLOYMENT

NAME \_\_\_\_\_ LAST 4 DIGITS OF SSN: \_\_\_\_\_  
(First) (MI) (Last)

POSITION APPLYING FOR: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE NO. (\_\_\_\_\_) \_\_\_\_\_ ARE YOU OVER THE AGE OF 18 YEARS?  YES  NO

ADDRESS \_\_\_\_\_  
(Street) (City) (State) (Zip)

ARE YOU WILLING TO ACCEPT:  FULL-TIME  PART-TIME  SEASONAL  TEMPORARY

WAGES EXPECTED \$ \_\_\_\_\_ SHIFT/TIMES WILLING & ABLE TO WORK: \_\_\_\_\_

WILLING/ABLE TO WORK OVERTIME?  YES  NO DATE AVAILABLE TO BEGIN WORK: \_\_\_\_\_

ARE YOU LEGALLY ELIGIBLE TO BE EMPLOYED IN THE U.S.?  YES  NO (PROOF IS REQUIRED UPON HIRE)

LIST SKILLS OR QUALIFICATIONS YOU HAVE TO OFFER THIS COMPANY \_\_\_\_\_

HAVE YOU EVER BEEN EMPLOYED HERE? \_\_\_\_\_ IF YES, WHEN? \_\_\_\_\_

ANY RELATIVES OR FRIENDS IN OUR EMPLOY? \_\_\_\_\_ IF YES, WHO? \_\_\_\_\_

HAVE YOU APPLIED HERE BEFORE? \_\_\_\_\_ IF YES, WHEN? \_\_\_\_\_

HOW WERE YOU REFERRED TO THIS COMPANY/POSTION? \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME OR PLEADED NO CONTEST FOR ANY OFFENSE OR VIOLATION OTHER THAN MINOR TRAFFIC VIOLATIONS?  YES  NO (Convictions are not an automatic bar to employment; however falsification or misrepresentation of information may be grounds for dismissal.) If yes, complete:

CONVICTION REASON	DATE	CITY/STATE

### EDUCATIONAL BACKGROUND

TYPE OF SCHOOL	NAME, CITY & STATE	GRADUATED	MAJOR
ELEMENTARY		<input type="checkbox"/> Yes <input type="checkbox"/> No	
HIGH SCHOOL		<input type="checkbox"/> Yes <input type="checkbox"/> No	
GED/HSED		<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE		<input type="checkbox"/> Yes <input type="checkbox"/> No	
BUSINESS/TRADE		<input type="checkbox"/> Yes <input type="checkbox"/> No	

## WORK EXPERIENCE

Include all employment held for at least the most recent 7 year period. Any gaps during this time frame should be listed or explained below. List, in order, the most recent employer first. Only the jobs listed will be used for consideration in the hiring process. If more room is necessary, attach a sheet of paper with any additional information. Any volunteer work that pertains to the position applying for may be included.

1. COMPANY \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ WAGE: Start \$ \_\_\_\_\_ End \$ \_\_\_\_\_  
     (Street)                      (City)                      (State & Zip)  
 DATES EMPLOYED: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ SUPERVISOR \_\_\_\_\_  
                                   Month    Year                      Month    Year    (Name and Title)  
 JOB TITLE \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
 JOB DUTIES \_\_\_\_\_ MAY WE CONTACT? \_\_\_\_\_

2. COMPANY \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ WAGE: Start \$ \_\_\_\_\_ End \$ \_\_\_\_\_  
     (Street)                      (City)                      (State & Zip)  
 DATES EMPLOYED: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ SUPERVISOR \_\_\_\_\_  
                                   Month    Year                      Month    Year    (Name and Title)  
 JOB TITLE \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
 JOB DUTIES \_\_\_\_\_ MAY WE CONTACT? \_\_\_\_\_

3. COMPANY \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ WAGE: Start \$ \_\_\_\_\_ End \$ \_\_\_\_\_  
     (Street)                      (City)                      (State & Zip)  
 DATES EMPLOYED: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ SUPERVISOR \_\_\_\_\_  
                                   Month    Year                      Month    Year    (Name and Title)  
 JOB TITLE \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
 JOB DUTIES \_\_\_\_\_ MAY WE CONTACT? \_\_\_\_\_

4. COMPANY \_\_\_\_\_ PHONE: (\_\_\_\_\_) \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ WAGE: Start \$ \_\_\_\_\_ End \$ \_\_\_\_\_  
     (Street)                      (City)                      (State & Zip)  
 DATES EMPLOYED: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ SUPERVISOR \_\_\_\_\_  
                                   Month    Year                      Month    Year    (Name and Title)  
 JOB TITLE \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
 JOB DUTIES \_\_\_\_\_ MAY WE CONTACT? \_\_\_\_\_

**EXPLAIN ALL GAPS IN YOUR WORK HISTORY (to account for the last 7 years)**

DATES	REASON

**REFERENCES (Professional References Preferred)**

NAME	PHONE NUMBER	RELATIONSHIP
	(     )	
	(     )	
	(     )	

**Please Note:** (1) I understand that a false statement or misrepresentation of fact on this application or during the interview process may be considered sufficient cause for dismissal. (2) The use of this application does not indicate that there are any positions open and does not in any way obligate General Pet Supply. (3) I authorize General Pet Supply to obtain information from my former employers, schools and references listed on this application and authorize the school, company and references to provide General Pet Supply with any and all information concerning my previous employment and relevant personal information, and release all parties from all liability for any damage that may result. (4) I understand that I will be required to submit to and successfully pass a pre-employment drug screen. All job offers will be contingent upon successful passing of the pre-employment drug screen. I understand that a copy of the company's drug and alcohol policy is available upon request.

Thank you for completing this application and for your interest in employment with us. We would like to assure you that your opportunity for employment with this company will be based only on your merit and on no other consideration. General Pet Supply is an equal opportunity employer.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_