



1543 FIRST ST.  
LIVERMORE, CA 94550  
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## APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_ Position Applying For: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Other: \_\_\_\_\_

Email Address: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Are you currently employed? If so, may we contact your current employer for reference?  Yes  No

If you answered no, please explain \_\_\_\_\_

## EDUCATION

High School: \_\_\_\_\_ Did you graduate?  Yes  No

College: \_\_\_\_\_ Major Subjects: \_\_\_\_\_ Graduate?  Yes  No

Other Education: \_\_\_\_\_ Major Subjects: \_\_\_\_\_ Graduate?  Yes  No

Subjects of special study: \_\_\_\_\_

Special training: \_\_\_\_\_

Activities: (Civic, Athletic, Etc.) \_\_\_\_\_

## SKILLS

*Have you had experience in the following areas?*

Typing  Yes  No Skill Level: \_\_\_\_\_

Microsoft Word  Yes  No Skill Level: \_\_\_\_\_

Microsoft Excel  Yes  No Skill Level: \_\_\_\_\_

Telephone skills  Yes  No Skill Level: \_\_\_\_\_

Medical charting  Yes  No Skill Level: \_\_\_\_\_

Animal health  Yes  No Skill Level: \_\_\_\_\_

Animal handling  Yes  No Skill Level: \_\_\_\_\_

## EMPLOYMENT HISTORY

*Please list the most recent employer first.*

Date: Month & Year	Name & Phone #	Salary	Position	Reason For Leaving
From: _____ To: _____				
From: _____ To: _____				
From: _____ To: _____				
From: _____ To: _____				

## PERSONAL REFERENCES

Name	Address & Phone #	Business	Years Acquainted

## EMERGENCY CONTACT

In case of emergency, notify: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

## ADDITIONAL INFORMATION

*Please complete the following information in your own handwriting. PLEASE DO NOT TYPE.*

1. Describe the responsibilities on your present or last job. Please give a detailed response. \_\_\_\_\_

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2. What factors would contribute to your sense of satisfaction on a job? \_\_\_\_\_

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3. What aspects of working with people do you find enjoyable, and what, if any, do you find less enjoyable? \_\_\_\_\_

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4. What is your idea of excellent client service? \_\_\_\_\_

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5. How do you feel about working as part of a team? \_\_\_\_\_

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6. What specific aspects of your education or experience do you consider to be beneficial to this position? \_\_\_\_\_

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I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date