Job Application

Petscort Services. Inc. is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment based on race, color, sex, national origin, religion, age, equal pay, disability and genetic information. Should an applicant need accommodation in the application process, he or she should contact a company representative.

Please fill out sections below: **Applicant Information Applicant Name:** Social Security #: Address: City, State, Zip Code: ______ Telephone # (s): E-mail Address: Date of Application: **Employment Position:** What position(s) are you applying for? (Please check all that apply.) ___ Handler Walker ___ Yard Attendant Intern How did you learn of this position? What date are you available to begin work should you be hired? The above listed positions require availability for evenings and weekends as well as some holidays. Are you available to work for these times? ___ Yes ___ No We conduct background checks on all of our employees in order to meet the requirements of our insurance providers. May we do a background check on you? Y___ N___ **Personal Information** In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form I-9 upon hire. Have you been convicted of a felony within the last five(5) years? _____ Yes _____ No If "yes", please explain:

Education and Training			
High School			
Name	Location (City, State)	Year Graduated	Degree Earned
College/University			
Name	Location (City, State)	Year Graduated	Degree Earned
ocational/Specialized T	raining		
Name	Location (City, State)	Year Graduated	Degree or Certificate Earned
mployment History			
resent or Most Recent P	osition		
Employer	Address	Dates of Employment	Position Title
Supervisor's Name	Phone # (s)	E-mail Address	Responsibilities
Supervisor s name	I none " (o)	2 man riaar ess	Responsioneres
re you leaving this position	n?Yes No If so, please gi	ve your reasons for leaving:	

Previous Positions

Employer	Address	Dates of Employment	Position Title
Supervisor's Name	Phone # (s)	E-mail Address	Responsibilities
-			
Reason for Leaving:			
Employer	Address	Dates of Employment	Position Title
Supervisor's Name	Phone # (s)	E-mail Address	Responsibilities
Reason for Leaving:			
May we contact your pre	cant amplayar?	Voc. No.	
	sent employer?	_ res No	
References	1.1 /Dl (
Please list Name/Title/A	ddress/Phone for at I	east 3 people not related to y	ou.
I certify that information o	ontained in this appli	cation is true and complete. I	understand that false
nformation may be groun	ds for not hiring me o	r for immediate dismissal at a	
oe hired by <i>Petscort Ser</i>			
		formation listed above. I und	
		n <i>employee at will</i> . As such I u notice or cause, by either me	
may be terminated at ally	ame with or without i	notice of cause, by either file	or pressure Services
Applicant Signature			
Applicant Signature			