



A.V.H.S.  
P.O. Box 1335  
701 Gregg Drive  
Buena Vista, CO 81211

# Employment Application

Ark-Valley Humane Society, Inc. is An Equal Opportunity Employer:

*We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.*

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Position Applied For: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Are you seeking: FULL-TIME \_\_\_ PART-TIME \_\_\_ SEASONAL EMPLOYMENT \_\_\_  
When could you start work? \_\_\_\_\_

NAME: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

MAIDEN NAME (If applicable) \_\_\_\_\_ Phone: \_\_\_\_\_

Present Street Address: \_\_\_\_\_

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

Mailing Address(if different than above): \_\_\_\_\_

Are you 18 years of age or older: \_\_\_ Yes \_\_\_ No (If hired, you may be required to submit proof of age.)

Social Security Number (optional) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

If hired, can you furnish proof you are eligible to work in the U.S.? \_\_\_ Yes \_\_\_ No

Have you ever applied here before? \_\_\_ Yes \_\_\_ No If yes, when? \_\_\_\_\_

Were you ever employed here? \_\_\_ Yes \_\_\_ No If yes, when? \_\_\_\_\_

Have you ever been convicted of any law violation? (Include any plea of "guilty" or "no contest." Exclude minor traffic violations.) \_\_\_ Yes \_\_\_ No

If yes, give details: \_\_\_\_\_

( A conviction will not necessarily disqualify an applicant for employment.)

If employed, do you expect to be engaged in any additional business or employment outside of your job? \_\_\_ Yes \_\_\_ No

If yes, please explain: \_\_\_\_\_



[www.ark-valley.org](http://www.ark-valley.org)

## Work History

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

*Note: A job offer may be contingent upon acceptable references from current and former employers.*

Name of Employer: _____	Supervisor: _____
Address: _____	Employed from (mo/yr) ____/____ to ____/____
City, State, Zip: _____	Pay: Start \$ _____ Final \$ _____
Telephone: (_____) _____	Reason for leaving: _____
Title: _____	_____
Duties: _____	_____

Name of Employer: _____	Supervisor: _____
Address: _____	Employed from (mo/yr) ____/____ to ____/____
City, State, Zip: _____	Pay: Start \$ _____ Final \$ _____
Telephone: (_____) _____	Reason for leaving: _____
Title: _____	_____
Duties: _____	_____

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City, State, Zip: _____	Pay: Start \$ _____ Final \$ _____
Telephone: (_____) _____	Reason for leaving: _____
Title: _____	_____
Duties: _____	_____



Education	Number of Years Completed	Diploma/ Degree Certificate
List name and address of schools: High School or GED: _____		
College or University: _____ Subjects Studied: _____ _____ _____		
Vocational or Technical: _____ Subjects Studied: _____ _____ _____		

**Special Skills**

What skills or additional training do you have that are related to the job for which you are applying?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What machines or equipment can you operate that are related to the job for which you are applying?

\_\_\_\_\_

Do you have a valid driver's license?  Yes  No

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_ Class of License: \_\_\_\_\_

Have you had your driver's license suspended or revoked in the last 3 years?  Yes  No

If yes, give details: \_\_\_\_\_

List professional, trade, business, or civic activities and offices held. (Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability or other protected status.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

References

Have you worked or attended school under any other names? \_\_\_\_ Yes \_\_\_\_ No

If yes, give names: \_\_\_\_\_

Are you presently employed? \_\_\_\_ Yes \_\_\_\_ No

If yes, whom do you suggest we contact? \_\_\_\_\_  
(please give name and best number for contact.)

Have you ever been fired from a job or asked to resign? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Give three references, not relatives or former employers:

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

***AFFIDAVIT, CONSENT, AND RELEASE.***

***PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING.***

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organization to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required. I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

**I understand that this application, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time. Only the president of the board of directors has the authority to enter into an agreement of employment for any specified period, and such agreement must be in writing, signed by the president and the employee. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without reason, and with or without notice.**

I have read, understood, and by my signature consent to these statements.

\_\_\_\_\_  
Signature of employee

\_\_\_\_\_  
Date