



winchester road

ANIMAL HOSPITAL

Dr. Melinda Combs | 1479 Winchester Road | Huntsville, AL 35811



Employment Application

Date _____

First Name _____ M.I. _____ Last Name _____

Address _____ Apt. # _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell _____

Are you a U.S. Citizen? Yes No Drivers License Number _____ State _____

Currently Employed? Yes No Most Recent/Current Position _____

May we contact your current employer? Yes, Phone _____ No

Date Available to Start _____ Position Desired _____

Salary Desired _____

Please list any other skills that you have acquired (Customer service, Computer, Typing, etc.)

Why do you want to work here? _____

Please list your 3 most professional qualities:

1.

2.

3.

Do you have your own reliable transportation? Yes No

Can you be flexible with your work schedule? Yes No

If you do have schedule restrictions, please list any that apply (School, child care, etc.) Schedule restrictions will not constitute rejection for employment.

Professional References:

Name _____ Phone _____
Relationship w/Reference _____

Name _____ Phone _____
Relationship w/Reference _____

Name _____ Phone _____
Relationship w/Reference _____

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employments, educational financial or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools or persons from all liability when responding inquiries in connection with my application. In the event that I am employed, I understand that any information in this application that was falsified can be grounds for immediate termination of my employment.

Signature of Applicant _____ Date _____