



# Dupont Veterinary Clinic at Coldwater

## Application for Employment

Please print in ink. Fill in all information – DO NOT SUBSTITUTE WITH “SEE RESUME”.

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap, disability, sexual orientation, national origin or any other characteristic protected by applicable federal, state, or local law. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on any basis prohibited by federal, state or local laws. It is Dupont Veterinary Clinic at Coldwater's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as provided under the Americans with Disabilities Act or other applicable laws.

<b>Personal Information</b>		
Name (Last, First, Middle)		Date of Application:
Residence (Address, City, State, ZIP)		
Mailing Address – If different from residence.		
Home Telephone	Cell Phone	Other Telephone
Are you 18 years or older? Yes: _____ No: _____		Do you have the legal right to work in the U.S.? Yes: _____ No: _____
How were you referred to us?		Have you ever been employed by us? Yes: _____ No: _____
If you are bilingual, what languages do you Speak, Read or Write?		

<b>Position</b>	
Please be advised that the position for which you are applying may require weekday hours, evening hours, Saturday hours, Sunday hours and Holiday hours. No guarantee of hours is made or offered under this application.	
For what position are you applying?	Salary Desired
Date you can report to work?	

Are you seeking Full-time or Part-time? \_\_\_\_\_

Are you available for Weekday Hours? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Are you available for Evening Hours? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Are you available for Saturday Hours? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Are you available for Sunday Hours? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Are you available for Holiday Hours? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Are there any particular hours you are not available? \_\_\_\_\_

\_\_\_\_\_

**Education / Training History**  
**High School, College, Trade School or Special Training**

Name of School	Location	Dates Attended	Degree / Certificate	Major	GPA

**License / Registration / Certificate**

List any **required** professional license, registration, certificate, Commercial Driver’s License (CDL), etc.

Description	State	Number	Expiration

**Employee History**

The DEA requires us to ask these questions of every applicant.

Within the past five years, have you been convicted of a felony, or within the past two years, of any misdemeanor or are you presently formally charged with committing any criminal offense? (Do not include any traffic violations, juvenile offenses or military convictions, except by general court martial.) If the answer is yes, furnish details of conviction, offense, location, date and sentence. Yes: \_\_\_\_\_ No: \_\_\_\_\_

In the past three years, have you ever knowingly used any narcotics, amphetamines or barbiturates, other than those prescribed to you by a physician? If the answer is yes, furnish details. Yes: \_\_\_\_\_ No: \_\_\_\_\_

Details:

### Character References

Do not list relatives or past employers

Name	Occupation	Address	Phone Number	Years Known

### Work History

Job Number 1 (current or most recent)

Name of Employer:		Supervisor's Name		Supervisor's Title	
Address:		Phone #		Position:	
Dates Employed: From: _____ To: _____		Salary or Wages: Beginning \$ _____ Final \$ _____		May we contact: Yes: _____ No: _____	
Describe Major Duties:			Specific reason for leaving:		

Job Number 2					
Name of Employer:			Supervisor's Name		Supervisor's Title
Address:			Phone #	Position:	
Dates Employed: From:_____ To:_____		Salary or Wages: Beginning \$ _____ Final \$ _____		May we contact: Yes:_____ No:_____	
Describe Major Duties:			Specific reason for leaving:		

Job Number 3					
Name of Employer:			Supervisor's Name		Supervisor's Title
Address:			Phone #	Position:	
Dates Employed: From:_____ To:_____		Salary or Wages: Beginning \$ _____ Final \$ _____		May we contact: Yes:_____ No:_____	
Describe Major Duties:			Specific reason for leaving:		

Experience and Skills									
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Office Skills	Yes	NO	If yes, what is your skill level?			Clinical Skills	YES	NO	If yes, what is your skill level?		
			Fair	Good	Exc.				Fair	Good	Exc.
Typing						Emergency Care					
Computer						Pack – Prep					
10 Key Machine						Urinalysis					
T r e a t m e n t Presentation						Blood Analysis					

Fee Presentation						Fecal Analysis					
Bookkeeping						Take X-Rays					
Collections						Develop X-Rays					
Charting						Injections, IV, etc					
Telephone Skills						Anesthesia					
Appointment Scheduling						Surgical Assisting					
Other						Other					

### Advisement of Background & Drug Screenings

Employment with Dupont Veterinary Clinic at Coldwater may involve the care for the pets and property of other people, managing financial transactions and exchange of money, handling of controlled substances, safe management of hazardous materials and x-ray radiation, and many other functions requiring profound responsibility that are required in veterinary practice. Therefore, to ensure that the individuals who join Dupont Veterinary Clinic at Coldwater are and remain well qualified with a strong potential to be productive and successful, it is our policy to conduct comprehensive employment background checks. Background checks may be conducted on all job applicants prior to their employment and may be conducted on employees at any time during their employment with us. Background checks may include, without limitation, criminal record histories, previous employment verification, and professional and personal reference checks, education verifications, motor vehicle records, and credit histories. In addition, a drug test will be required as a condition of employment or as a condition of continued employment. Further, Dupont Veterinary Clinic at Coldwater will respond to all employment reference check inquires from others. Responses to such inquires will confirm an employee's dates of employment, wage rates, and position(s) held. For employment data to be released, a written authorization and release signed by the individual who is the subject of the inquiry may be requested.

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Certification and Signature

I understand that any verbal or written statement that is false, fraudulent or misleading that is contained in this application or attached materials, or made in the course of any related employment process, whether made by me or by others at my request, will result in rejection of my application, denial of employment, or dismissal from service if discovered after employment, and under some circumstances, may result in prosecution for a crime. I certify that all statements contained herein are true and complete. I understand that if hired, I must prove that I am legally authorized to work in the United States. I release Dupont Veterinary Clinic at Coldwater and all providers of information from any liability as a result of furnishing and received any information related to the hiring process.

X \_\_\_\_\_  
Signature

\_\_\_\_\_  
Date