

## CONVICTION RECORD

Have you ever been convicted of crime other than a minor traffic offense?  Yes, please explain  No \_\_\_\_\_

*An affirmative response will not necessarily disqualify you from employment.*

## PROFESSIONAL REFERENCES

List the names, addresses and phone numbers of three professional references who are not related to you.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## PERMISSION TO WORK

Are you legally authorized to work in the United States?  Yes  No

## APPLICANT'S STATEMENT

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying information. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event I am hired.

I hereby agree to submit to any lawful drug, integrity, or skills testing that may be required as a condition of employment or continued employment and understand that unless otherwise prohibited by law, refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge. I further agree to submit to search of my person or of any locker or work area that may be assigned to me, and I hereby waive all claims for damages on account of such examination.

I understand that this application is valid for 6 months; I will reapply after that time if I am still interested in employment. I also understand that my employment is terminable-at-will, and that this application is not, and is not intended to be, a contract for continued employment.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## FOR KHS STAFF USE ONLY

First Interview Date \_\_\_\_\_ Second Interview Date \_\_\_\_\_ Reference Check \_\_\_\_\_

Notes



# KANSAS HUMANE SOCIETY Employment Application

3313 N. Hillside Wichita, KS 67219 - 316.524.9196 - www.kshumane.org

### Our Vision

To end the euthanasia of all healthy and treatable animals.

### Our Mission

To set the standard in care and adoption services for pets while educating the community in the ethical and responsible treatment of companion animals.

### About Us

The Kansas Humane Society is a private, not-for-profit, 501(c)(3) organization that receives over 14,500 animals each year from citizens unable or unwilling to care for them.

Date \_\_\_\_\_ Are you 18 years of age or older?  Yes  No

Name \_\_\_\_\_ E-mail \_\_\_\_\_

Current Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Previous Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

What position are you applying for? \_\_\_\_\_

What responsibilities or tasks do you expect to perform for this job? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Hourly Wage/Salary Desired \_\_\_\_\_ Date Available \_\_\_\_\_

Seeking  Full Time Employment  Part Time Employment  Either

Are you available to work weekends or holidays?  Yes  No

How did you hear about this position? \_\_\_\_\_

## WORK EXPERIENCE

List your previous experience beginning with your most recent position.

Company \_\_\_\_\_ May we contact this employer?  Yes  No

Address/City/State \_\_\_\_\_

Phone \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Dates Employed - Beginning \_\_\_\_\_ Ending \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Ending Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company \_\_\_\_\_ May we contact this employer?  Yes  No

Address/City/State \_\_\_\_\_

Phone \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Dates Employed - Beginning \_\_\_\_\_ Ending \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Ending Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Company \_\_\_\_\_ May we contact this employer?  Yes  No

Address/City/State \_\_\_\_\_

Phone \_\_\_\_\_ Supervisor's Name \_\_\_\_\_

Dates Employed - Beginning \_\_\_\_\_ Ending \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Ending Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

## EDUCATION

High School Name \_\_\_\_\_ City/State \_\_\_\_\_

Years Completed | 1 2 3 4 Graduation Date \_\_\_\_\_

College/University Name \_\_\_\_\_ City/State \_\_\_\_\_

Years Completed | 1 2 3 4 Graduation Date \_\_\_\_\_ Major \_\_\_\_\_

Additional School/Training Name \_\_\_\_\_ City/State \_\_\_\_\_

Years Completed | 1 2 3 4 Graduation Date \_\_\_\_\_ Major \_\_\_\_\_

## TRAINING AND SKILLS

Please mark if you have professional experience in the following areas and explain below:

- Customer Service     Animal Handling     Animal Behavior     Animal Welfare  
 Office Skills     Kennel Cleaning     Vet Technician     Animal Grooming

Customer Service Skills \_\_\_\_\_

Office Skills \_\_\_\_\_

Professional Animal Care Training/Experience \_\_\_\_\_

Have you worked professionally with domestic animals before?  Yes  No

If yes, which ones?  Dogs  Cats  Rodents  Birds  Other \_\_\_\_\_

Can you perform the essential functions of the job applied for with/without reasonable accomodations?  Yes  No

## INQUIRY

Why do you want to work for the Kansas Humane Society? \_\_\_\_\_

What are your thoughts about euthanasia? \_\_\_\_\_