



EMPLOYMENT APPLICATION

PLEASE PRINT			Today's Date: _____	
First Name	M.I.	Last Name	Preferred Name/Nickname	
Street Address	Apartment #	City	State	Zip Code
Home Phone	Cell/Work Phone		E-Mail Address	

PLEASE PLACE A CHECK BY YOUR RESPONSE OR PROVIDE THE APPROPRIATE INFORMATION

Are you interested in: Full-time _____ Part-time _____ Temporary _____

What schedule would you prefer? Weekdays _____ Weekends _____

How did you hear about the position? Classified Ad _____ Friend (Name) _____ Internet _____

Desired Pay:
 Hourly Pay (minimum if applicable) _____ Annual Pay (minimum) _____ Annual Pay (desired) _____

When are you able to start work? (Date) _____

Position desired: _____

PLEASE CHECK YES OR NO TO THE FOLLOWING:

Are you authorized to work in the United States? Yes ___ No ___
 Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws, The Humane Society of Sarasota County, Inc. will verify the status of every individual offered employment with the Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.

Are you under 18 years of age? Yes ___ No ___ If yes, can you furnish a work permit? Yes ___ No ___

Have you ever been convicted of or fined and/or sentenced, including probation, for any criminal offense (misdemeanor or felony), or have you ever pleaded guilty or no contest (nolo contendere) to any criminal offense (misdemeanor or felony)?
 Yes ___ No ___ If yes, Please explain: _____

Are you capable of performing the essential functions of the job for which you are applying with or without a reasonable accommodation? Yes ___ No ___

PLEASE LIST YOUR WORK EXPERIENCE BELOW (MOST RECENT JOB FIRST)

FROM ____/____ MO. YR.	COMPANY NAME		YOUR POSITION and TITLE	
	NO. & STREET		SUPERVISOR'S NAME, TITLE and POSITION	
	CITY	STATE	ZIP CODE	SUPERVISOR'S TELEPHONE NUMBER
TO ____/____ MO. YR.	TYPE OF BUSINESS	STARTING PAY	FINAL PAY	
		\$	\$	
	TELEPHONE NUMBER ()	TERMINATION <input type="checkbox"/> VOLUNTARY <input type="checkbox"/> INVOLUNTARY	REASON	
BRIEFLY DESCRIBE YOUR <u>MAJOR DUTIES</u> AND <u>REASON(S) FOR TERMINATION</u>				

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	TELEPHONE NUMBER ()	TERMINATION <input type="checkbox"/> VOLUNTARY <input type="checkbox"/> INVOLUNTARY	REASON	
BRIEFLY DESCRIBE YOUR <u>MAJOR DUTIES</u> AND <u>REASON(S) FOR TERMINATION</u>				

ADDITIONAL INFORMATION:

EDUCATION:

NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	DID YOU GRADUATE?	TYPE OF DEGREE OR DIPLOMA
HIGH SCHOOL OR PREP			
COLLEGE			
COLLEGE OR GRADUATE			
OTHER			

PROFESSIONAL LICENSES:

TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER
TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER

REFERENCES: Please list three professional references

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE

PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the Humane Society of Sarasota County, Inc. (HSSC) for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from HSSC's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with HSSC in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between HSSC and me, and that in the event I am hired, my employment will be "at will" and either HSSC or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy, and the like, distributed by HSSC to its employees, is intended to or can create an employment contract, an offer of employment, or any obligation on HSSC's part. HSSC may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge, or change any benefit, policy practice, condition, or process affecting its employees.

References: I hereby authorize the company and its agents to make such investigations and inquires into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application, and I specifically authorize the release of information by any schools, businesses, individuals, services, or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

Temporary/Contract Employment: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify HSSC immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNED: _____

DATE: _____

The Humane Society of Sarasota County, Inc. is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, The Humane Society of Sarasota County, Inc. complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. The Humane Society of Sarasota County, Inc., also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.