DRAKE CENTER
For Veterinary Care

*F*or people whose pets are part of the family

Application for Employment

Date: _____   Position Applying For: _____

Name: _____

Mailing Address: _____

City: _____   State: _____   Zip: _____

Email Address: _____

Phone:

Home: _____

Other: _____

Are you currently employed? If so, may we contact your current employer for reference? ❑ Yes   ❑ No

If you answered no, please explain _____

EDUCATION

High School: _____   Did you graduate? ❑ Yes   ❑ No

College: _____   Major Subjects: _____   Graduate? ❑ Yes ❑ No

Other Education: _____   Major Subjects: _____   Graduate? ❑ Yes ❑ No

Subjects of special study: _____

Special training: _____

Activities: (Civic, Athletic, Etc.) _____

SKILLS

Have you had experience in the following areas?

Typing	❑ Yes	❑ No	Skill Level:	_____
Microsoft Word	❑ Yes	❑ No	Skill Level:	_____
Microsoft Excel	❑ Yes	❑ No	Skill Level:	_____
Telephone skills	❑ Yes	❑ No	Skill Level:	_____
Medical charting	❑ Yes	❑ No	Skill Level:	_____
Animal health	❑ Yes	❑ No	Skill Level:	_____
Animal handling	❑ Yes	❑ No	Skill Level:	_____

EMPLOYMENT HISTORY

Please list the most recent employer first.

Date: Month & Year	Name & Phone #	Position	Reason For Leaving
From: _____ To: _____			
From: _____ To: _____			
From: _____ To: _____			
From: _____ To: _____			

PERSONAL REFERENCES

Name	Address & Phone #	Business	Years Acquainted

EMERGENCY CONTACT

In case of emergency, notify: _____

Address: _____ Telephone: _____

Please complete the following information in your own handwriting. PLEASE DO NOT TYPE.

1. Describe the responsibilities on your present or last job. Please give a detailed response. _____

_____

_____

_____

2. What factors would contribute to your sense of satisfaction on a job? _____

_____

_____

_____

3. What aspects of working with people do you find enjoyable, and what, if any, do you find less enjoyable? __

_____

_____

_____

4. What is your idea of excellent client service? _____

_____

_____

_____

5. How do you feel about working as part of a team? _____

_____

_____

_____

6. What specific aspects of your education or experience do you consider to be beneficial to this position? ___

_____

_____

_____

_____   _____

Signature of Applicant   Date