# The Dog Scoop logo yellow

### Employment Application

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | | |  | | | | | | | | First |  | | | | | M.I. | | Date | |  | |
| Street Address | | | |  | | | | | | | | | | | | | Apartment/Unit # | | | |  | |
| City |  | | | | | | | | | | State |  | | | | | ZIP |  | | | | |
| Phone |  | | | | | | | | | | E-mail Address | |  | | | | | | | | | |
| Date Available | | | |  | | | | | Hours You Are Able To Work  (Mon-Sat) | | |
| Are you a citizen of the United States? | | | | | | | | YES | | NO | | If no, are you authorized to work in the U.S.? | | | | | | | | YES | | NO |
| Have you ever been convicted of a felony? | | | | | | | | YES | | NO | | If yes, explain | | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| Education | | | | | | | | | | | | | | | | | | | | | | |
| High School | | |  | | | | | | | Address | |  | | | | | | | | | | |
| From | |  | | | To |  | Did you graduate? | | | YES | | NO | | Degree | |  | | | | | | |
| College | |  | | | | | | | | Address | |  | | | | | | | | | | |
| From | |  | | | To |  | Did you graduate? | | | YES | | NO | | Degree | |  | | | | | | |
| Other | |  | | | | | | | | Address | |  | | | | | | | | | | |
| From | |  | | | To |  | Did you graduate? | | | YES | | NO | | Degree | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| Experience With dogs | | | | | | | | | | | | | | | | | | | | | | |
| Professional or Personal | | | | | | | | | | | | | | | | | | | | | | |
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| --- | --- | --- | --- |
| Please answer the following questions | | | |
|  |  |  | **Explain If Needed** |
| Do you have a valid Massachusetts driver’s license? | YES | NO |  |
| Are you able to drive a standard transmission vehicle? | YES | NO |  |
| Have you ever had a car accident or a ticket? | YES | NO |  |
| Are there any types of dogs that frighten you? | YES | NO |  |
| Are you aware that animals can be unpredictable, and that while working with dogs you may be scratched or bitten? | YES | NO |  |
| Would you describe yourself as patient and calm? | YES | NO |  |
| Would you describe yourself as energetic and excitable? | YES | NO |  |
| Are you prepared and willing to work outside in all weather conditions? | YES | NO |  |
| Do you have a reliable vehicle and cell phone? | YES | NO |  |
| Are you able to lift 50lbs? | YES | NO |  |
| Are you able to stand for 4-6 hours? | YES | NO |  |
| Is English your primary language? | YES | NO |  |
| Are you comfortable with moderate to heavy cleaning? | YES | NO |  |
| What are your strengths in the workplace? |  | | |

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| Previous Employment | | | | | | | | | | | | | | | | | | |
| Company | | |  | | | | | | | | | Phone | ( ) | | | | | |
| Address | |  | | | | | | | | | |  | |  | | | | |
| Job Title | |  | | | | | | | |
| Responsibilities | | | | |  | | | | | | | | | | | | | |
| From |  | | | | To | |  | | Reason for Leaving | |  | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | YES | NO |  | | | | | |
| Company | | |  | | | | | | | | | Phone | ( ) | | | | | |
| Address | |  | | | | | | | | | | Supervisor | |  | | | | |
| Job Title | |  | | | | | | | |
| Responsibilities | | | | |  | | | | | | | | | | | | | |
| From |  | | | | To | |  | | Reason for Leaving | |  | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | YES | NO |  | | | | | |
| Company | |  | | | | | | | | | | Phone | ( ) | | | | | |
| Address | |  | | | | | | | | | | Supervisor | |  | | | | |
| Job Title | |  | | | | | | | |
| Responsibilities | | | | |  | | | | | | | | | | | | | |
| From |  | | | | To | |  | | Reason for Leaving | |  | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | YES | NO |  | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Military Service | | | | | | | | | | | | | | | | | | |
| Branch | |  | | | | | | | | | | | | From |  | To |  | |
| Rank at Discharge | | | | | |  | | | | | | | | Type of Discharge | | | |  |
| If other than honorable, explain | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Disclaimer and Signature | | | | | | | | | | | | | | | | | | |
| I certify that my answers are true and complete to the best of my knowledge.  If this application leads to employment, I understand that false or misleading information in my application or interview  may result in my release. | | | | | | | | | | | | | | | | | | |
| Signature | | | |  | | | | | | | | | | | Date |  | | |