

REFRESHING PAWS
Employment Application

Name _____ Date of Application _____

D.O.B _____ Social Security # _____

Address _____

Home Phone: _____ Cell: _____

Education _____

Have you applied here before? (Circle one) YES NO If so, when? _____

Have you had other kennel experience? If so, where, when and for how long? _____

Do you have allergies to pets ? If yes please describe. _____

This is a very Physical job. Do you have any physical limitations? _____

Do you have asthma? (Circle one) YES NO

What hours are you available? _____

This job requires a lot of cleaning, do you have a problem with this? _____

Do you have any outside interests, hobbies or after school sport activities which may interfere with your work schedule? If so please list.

Please list two current references: _____

List any additional information or comments you think may be helpful. _____
