

GOOD SHEPHERD HUMANE SOCIETY

P.O. Box 285, Eureka Springs, Arkansas 72632 (479) 253-9188

DATE OF APPLICATION: _____ POSITION APPLIED FOR: _____

PLEASE PRINT

Last Name Initial	First	Middle	Social Security #
Maiden Name, if applicable			Salary Desired
Address			Home Phone # Cell Phone #
Do you have a valid driver's license? <input type="checkbox"/> No <input type="checkbox"/> Yes State _____ License # _____			Date available to start? Full time <input type="checkbox"/> Part time <input type="checkbox"/>
Specify days and hours if part-time:			
Do you own a reliable vehicle? <input type="checkbox"/> No <input type="checkbox"/> Yes		If no, how do you plan to get to work?	
If required, would you be willing to work overtime? <input type="checkbox"/> No <input type="checkbox"/> Yes		Are you willing to work weekends and holidays? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Do you have any allergies that would prevent you from handling the animals? <input type="checkbox"/> No <input type="checkbox"/> Yes Please explain: _____		Are you afraid of handling animals? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, which ones: _____	
Have you ever interviewed with GSHS before? <input type="checkbox"/> No <input type="checkbox"/> Yes			If yes, list date(s) and position(s): _____
Have you ever been employed by GSHS before? <input type="checkbox"/> No <input type="checkbox"/> Yes			If yes, list date(s) and position(s) and reason you left: _____
Do you have any relatives/friends employed by the GSHS? <input type="checkbox"/> No <input type="checkbox"/> Yes			If yes, list name(s) and position(s): _____
Are you at least 18 years old? <input type="checkbox"/> No <input type="checkbox"/> Yes		If under 18, do you have a job part-time? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Have you ever been convicted of a crime or a moving traffic violation? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Date: _____ Type: Misdemeanor <input type="checkbox"/> Felony <input type="checkbox"/> Traffic Violation <input type="checkbox"/> Please explain _____ _____			

EDUCATION INFORMATION

NAME/LOCATION OF SCHOOL	DATES ATTENDED	MAJOR STUDIES	HIGHEST GRADE COMPLETED DIPLOMA, DEGREE, LICENSE/CERTIFICATE



High School			
College/University			
Vocational, Business, Other			
What skills, experience, or training qualify you for this position?			
Do you use a computer? <input type="checkbox"/> No <input type="checkbox"/> Yes What computer programs are you familiar with?			

For purposes of compliance with The Immigration Reform and Control Act, are you legally eligible for employment in the United States? No Yes . Under the Immigration reform and Control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further you will be required to provide documentation to that effect should you be employed.

EMPLOYMENT INFORMATION

Start with your current or most recent employer. All information MUST be completed. You may attach a resume, but it does not take the place of completing all the required information below:

May we contact your present Employer ? No Yes

Employed From / /	Employer's Name	Supervisor's Name	Starting Salary
Employed Until / /	Employer's Address	Supervisor's Phone #	Ending Salary
Job Title:		Reason for leaving:	
Duties and Responsibilities:			

Employed From / /	Employer's Name	Supervisor's Name	Starting Salary
Employed Until / /	Employer's Address	Supervisor's Phone #	Ending Salary
Job Title:		Reason for leaving:	
Duties and Responsibilities:			

Employed From / /	Employer's Name	Supervisor's Name	Starting Salary
Employed Until / /	Employer's Address	Supervisor's Phone #	Ending Salary
Job Title:		Reason for leaving:	
Duties and Responsibilities:			

Employed From / /	Employer's Name	Supervisor's Name	Starting Salary
Employed Until / /	Employer's Address	Supervisor's Phone #	Ending Salary
Job Title:		Reason for leaving:	
Duties and Responsibilities:			

ANIMAL INFORMATION

Do you have any pets? <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, how many and what kind(s)?
Are your pets spayed/neutered? <input type="checkbox"/> No <input type="checkbox"/> Yes	If not, why not?
Have you had any previous experience, professionally or personally, in caring for animals? <input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, please explain:
Are you willing to encourage people to spay/neuter their pets? <input type="checkbox"/> No <input type="checkbox"/> Yes	If no, why not?

PROFESSIONAL REFERENCES:

List three (3), other than relatives

NAME	RELATIONSHIP	PHONE NUMBER	YEARS KNOWN
1.			
2.			
3.			

IN CASE OF EMERGENCY

Name of Local Relative or Friend (not living at same address)	Relationship to Applicant	Home Phone Number	Work Phone Number

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: _____

Use this space for further explanation of any question(s) on the application if needed: