

**APPLICATION FOR EMPLOYMENT**  
**HOME FOR LIFE, PO BOX 847, STILLWATER, MN 55082**

\*\* Home For Life does not hire minors for any reason or under any circumstance.

\*\* Home For Life will run a criminal records check on all prospective employees.

NAME \_\_\_\_\_

DOB \_\_\_\_\_ SSN \_\_\_\_\_

(Date of birth is only used for the criminal records check)

DRIVERS LICENSE NUMBER \_\_\_\_\_

(OR ID NUMBER) STATE ISSUING ID OR DRIVERS LICENSE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

What is the best time to reach you? \_\_\_\_\_

How long have you resided at this address? \_\_\_\_\_

List previous addresses for the last five years: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What hours are you interested in working? (Weekend, weekdays, evenings, occasional, variable)

Sunday \_\_\_\_\_ to \_\_\_\_\_ Thursday \_\_\_\_\_ to \_\_\_\_\_

Monday \_\_\_\_\_ to \_\_\_\_\_ Friday \_\_\_\_\_ to \_\_\_\_\_

Tuesday \_\_\_\_\_ to \_\_\_\_\_ Saturday \_\_\_\_\_ to \_\_\_\_\_

Wednesday \_\_\_\_\_ to \_\_\_\_\_

Number of hours desired per week \_\_\_\_\_

Please explain your interest in working for Home For Life: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MEDICAL CONDITIONS:** Please note any medical conditions that may be affected by duties at Home For Life. The job requires daily strenuous physical labor including heavy lifting, cleaning, working with dogs that weigh between 80-100 lbs., running and walking. Exposures to cleaning solvents including chlorine bleach and animal hair are daily occurrences. Applications with a history or pre-existing medical condition must make full disclosure on this application or risk waiving worker's compensation insurance coverage for any job related injuries.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VOLUNTEER EXPERIENCE:** Please list all volunteer experience; specifically list any in animal related fields: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION:** Please provide your education received:

High School attended: \_\_\_\_\_

City and State: \_\_\_\_\_ Graduated/GED: YES NO

Graduation or Anticipated Graduation Date: \_\_\_\_\_

Are you currently attending school? YES NO

School: \_\_\_\_\_

City and State: \_\_\_\_\_ Course of study: \_\_\_\_\_

Did you graduate: YES NO Graduation or Anticipated Graduation Date: \_\_\_\_\_

School: \_\_\_\_\_

City and State: \_\_\_\_\_ Course of study: \_\_\_\_\_

Did you graduate: YES NO Graduation or Anticipated Graduation Date: \_\_\_\_\_

**JOB HISTORY:** Please provide employment history since high school graduation. In the alternative, provide a resume specifically detailing previous employment in the animal care field.

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job description: \_\_\_\_\_

Hours worked: \_\_\_\_\_ Dates of employment: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job description: \_\_\_\_\_

Hours worked: \_\_\_\_\_ Dates of employment: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job description: \_\_\_\_\_

Hours worked: \_\_\_\_\_ Dates of employment: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job description: \_\_\_\_\_

Hours worked: \_\_\_\_\_ Dates of employment: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job description: \_\_\_\_\_

Hours worked: \_\_\_\_\_ Dates of employment: \_\_\_\_\_

Have you ever been discharged or requested to resign? If yes, please provide the details below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CRIMINAL HISTORY:** Have you ever been convicted of (or entered a plea of guilty to) a crime (excluding minor traffic violations)? Note: A conviction will be considered only so far as it relates to fitness to perform the job. If you have been convicted of (or entered a plea of guilty to) a crime, please provide information below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list three references – two must be former employers.

1. Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Relationship \_\_\_\_\_

3. Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Relationship \_\_\_\_\_

I affirm that I have not withheld any information asked for in this application, and that, to the best of my knowledge and belief, the statements made herein are true and correct. I understand any falsification of information on this application is grounds for immediate dismissal should I be offered a position with the Company and the information is later found to be false. I hereby authorize Animal Sanctuary of St. Croix Valley, Inc. to inquire as to my record of any or all former and current employers, references and criminal record.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE