APPLICATION FOR EMPLOYMENT

HOME FOR LIFE[®] PO BOX 847, STILLWATER, MN 55082 800-252-5918



** 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						
	SSN					
(Date of birth is only used fo	or the criminal records cheo	:k)				
DRIVERS LICENSE NUMBER						
(OR ID NUMBER) STATE ISSU	JING ID OR DRIVERS LICENS	SE				
ADDRESS						
CITY						
HOME PHONE	WO	RK PHONE				
EMAIL						
What is the best time to rea	ch you?					
How long have you resided	at this address?					
List previous addresses for t	he last five years:					
What hours are you interest	ted in working? (Weekend,	weekdays, evenings,	, occasional, variable)			
Sunday to	Thursday	to				
Monday to	Friday	to				
Tuesday to	Saturday	to				
Wednesday to	0					
Number of hours desired pe	er week					

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.

I do not have any medical conditions or physical restrictions

VOLUNTEER EXPERIENCE:	Please list all volunt	eer experience; s	pecifically list any i	n animal related

fields:

EDUCATION: Please provide your education received:

High School attended: ______

City and State: _____ Graduated/GED: _____

Graduation or Anticipated Graduation Date: _____

Are you currently attending school?

School: _____

City and State: _____ Course of study: _____

Did you graduate: YES NO Graduation or Anticipa	ted Graduation Date:
School:	
City and State:	_ Course of study:
Did you graduate: YES NO Graduation or Anticipa	ted Graduation Date:
JOB HISTORY: Please provide employment histor provide a resume specifically detailing previous e	y since high school graduation. In the alternative, mployment in the animal care field.
Employer:	
Address:	
Phone: Sup	ervisor:
Job description:	
Hours worked:	Dates of employment:
Employer:	
Address:	
Phone: Sup	ervisor:
Job description:	
Employer:	
Address:	
Phone: Sup	ervisor:
Job description:	
Hours worked:	Dates of employment:
Employer:	
Address:	
	ervisor:
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 reference	es – two must be forme	er employers.		
1. Name	Phone Number _		_	
Relationship				
2. Name	Phone Number _		-	
Relationship				
3 Name	Phone Number			
Relationship				
I affirm that I have not wi	thheld any informatior	asked for in this app	plication, and that,	to the best of my
knowledge and belief, the	e statements made her	ein are true and corr	ect. I understand a	ny falsification of
information on this applic	cation is grounds for im	mediate dismissal sh	ould I be offered a	position with
the Company and the inf	ormation is later found	l to be false. I hereby	authorize Animal	Sanctuary of St.
Croix Valley, Inc. to inquir	e as to my record of ar	ny or all former and c	urrent employers,	references and
criminal record.				

SIGNATURE OF APPLICANT

DATE