



Welcome....

and thank you for your interest in employment at Amherst Animal Hospital.

The following information about our veterinary hospital is important for you to understand as you consider employment with us.

Who We Are... We are a full service veterinary hospital that is an accredited member of the American Animal Hospital Association. We are guided by our mission and vision.

Application... It is important that you provide complete and accurate information in your application for employment. Resumes supplement, but do not replace information requested in the application. When you sign the application, you are attesting that the information is true and accurate.

Attendance... To meet the needs of our clients and their pets, we require regular attendance and punctuality.

Personal Appearance... We expect all employees to present themselves appropriately groomed. You must be clean and free of body odors. Piercings and tattoos cannot be extreme or excessive, offensive or distasteful. Hair should be clean and if dyed should look natural (no rainbow colors). Perfume, aftershave, and cologne are not permitted.

Drugs.... We are a smoke-free, drug-free workplace. We reserve the right to test employees for the use of controlled substances.

Reference Checks... We will conduct reference checks prior to making offers of employment.

2330 Amherst
Butte, MT 59701
406.494.4044

www.amherstanimalhosp.com



APPLICATION FOR EMPLOYMENT

2330 Amherst
Butte, MT 59701

Personal

Social Security No. _____ Date _____

Name _____ Email _____

Present address _____ Telephone _____

Position applied for _____ Rate of pay expected \$ _____ per _____

Are you applying for _____ **Full-Time?**

If full-time employment is desired, is there anything that would prevent you from working from Sunday through Saturday 6:30 a.m. or staying after 7:00 p.m. should we have an emergency case that requires last minute medical attention? _____

Or _____ **Part-Time?** If not available full-time specify days and hours you are available and not available for :

Were you previously employed by this organization? _____ If yes, when? _____

List any friends or relatives working here _____

If your application is considered favorably, on what date will you be available for work? _____ 20 ____

For what length of time are you seeking employment? _____

Are there any other work experiences, skills, or qualifications that you feel would especially fit you for work here? Please add additional comments you think are important to consider _____

How did you learn of this opening? _____

Are you 18 years of age or older? yes no

Do you have a valid driver's license?..... yes no

Driver's license number _____ Class of license _____

Have you had your driver's license revoked or suspended in the last 3 years? yes no

If hired, can you furnish proof you are eligible to work in the United States? yes no

Have you ever been convicted of a felony ? yes no

If yes, please explain _____

Have you previously applied here ? yes no

If yes, when ? _____

Have you worked for any firm under a different name ? _____

If yes, give name _____

Personal References *(not former employers or relatives)*

Name & occupation	Address	Phone number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Membership in Professional or Civic Organization *(do not include racial, religious, or nationality groups)*

Name or description of organization	Active from ---to	Offices held
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Education Record

Name of school	Degree awarded	grade average	Honors
High School _____	_____	_____	_____
College or University _____	_____	_____	_____
Business, trade, correspondence or night school _____	_____	_____	_____
Other (professional licenses or certifications) _____	_____	_____	_____

Do you type? yes no

Office machines and software you know how to operate _____

Work History *(begin with most recent, list all past employers, including any pertinent military experience)*

Name of Company	Business address	City	State	Phone
_____	_____	_____	_____	_____
Type of Business	Immediate supervisor	Date employed	From ----- To	
_____	_____	_____	_____	
Exact job title	Earnings at hire	At termination	Reason for termination	
_____	_____	_____	_____	
Description of duties				

Name of Company	Business address	City	State	Phone
Type of Business	Immediate supervisor	Date employed	From ----- To	
Exact job title	Earnings at hire	At termination	Reason for termination	
Description of duties				

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Type of Business	Immediate supervisor	Date employed	From ----- To	
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Description of duties				

Disclosure of Working Conditions

Amherst Animal Hospital is a small animal veterinary practice. In the course of your employment you can expect to encounter events that could be considered psychologically uncomfortable or physically challenging. We feel it is important to communicate these possibilities of these events before you begin work since this may affect your performance here at the hospital.

- 1) Lifting 40 – 50#.
- 2) Restraining unruly dogs or cats of any size.
- 3) Working after hours if needed for proper patient care.
- 4) Distressed, grieving and/or angry clients.
- 5) Unruly and/or aggressive animals.
- 6) Severely injured animals.

- 7) Dead animals.
- 8) Pain and distress of animals.
- 9) Feces, urine, blood, pus, other fluids, and detached body parts of animals.
- 10) Foul odors.
- 11) Drugs, chemicals and x-rays potentially harmful to pregnancy or respiratory conditions (asthma, etc).
- 12) Cold / hot temperatures.
- 13) Exposure to weather conditions while doing outdoor tasks.
- 14) Routine veterinary elective procedures such as tail docks and / or the declawing of animals.

Affidavit

I certify that the above answers given by me to the foregoing questions and statement are true and correct without consequential omissions of any kind whatsoever. I agree that the company shall be not be liable in any respect if my employment is terminated because of falsity of statements, answers or omissions made by me in this questionnaire. I also authorize the companies, schools or persons named above to give information regarding my employment, character or qualifications. I hereby release said companies from all liability for any damage for issuing this information.

Signature

Date
