



Applicant Information

Full Name _____ Social Security # _____
 Address _____ City _____
 State _____ Zip _____ Home Phone (____) _____ Cell Phone (____) _____
 Email Address _____
 Date Available to Start _____ Salary Requirement _____

Type of employment desired:
 Full Time Part Time Temporary Seasonal
 Position Applied for: _____
 Location Applying for: _____

Are you a citizen of the US? Yes No
 If not, are you legally allowed to work in the US? Yes No
 If you are under 18 -we require a work permit, can you furnish one? Yes No
 If no, please explain: _____

Have you ever pled "guilty", "No contest", or been convicted of a crime? Yes No
 If yes, give dates and details: _____

Who referred you to us? _____

Education

High School _____
 Address _____ City _____ State _____ Zip _____
 GPA _____ Class Rank _____ Years Completed _____ Did You Graduate? Yes No

College or University _____
 Address _____ City _____ State _____ Zip _____
 Years Completed _____ Degree _____ Did You Graduate? Yes No
 Major _____ GPA _____ Class Rank _____

Other Education: _____

Employment History

Company _____ Dates of Employment _____ to _____
 Address _____ City _____ State _____ Zip _____
 Phone (____) _____ Supervisor _____ Title _____
 Position Held _____ Starting Salary _____ Ending Salary _____
 Responsibilities _____

Reason for Leaving _____

May we contact this employer for a reference? Yes No

Company _____ Dates of Employment _____ to _____
Address _____ City _____ State _____ Zip _____
Phone (____) _____ Supervisor _____ Title _____
Position Held _____ Starting Salary _____ Ending Salary _____
Responsibilities _____

Reason for Leaving _____

May we contact this employer for a reference? Yes No

Company _____ Dates of Employment _____ to _____
Address _____ City _____ State _____ Zip _____
Phone (____) _____ Supervisor _____ Title _____
Position Held _____ Starting Salary _____ Ending Salary _____
Responsibilities _____

Reason for Leaving _____

May we contact this employer for a reference? Yes No

Summarize your Skills or Qualifications

References

Name _____ Phone (____) _____
Address _____ City _____ State _____ Zip _____

Name _____ Phone (____) _____
Address _____ City _____ State _____ Zip _____

Name _____ Phone (____) _____
Address _____ City _____ State _____ Zip _____

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby, release employers, schools, or persons from all liability when responding to inquiries in connection with my application.

Signed _____ Date _____

TailWaggers Doggy Daycare®
4528 Aicholz Road
Cincinnati, OH 45245

tailwaggersdoggydaycare.com