



**EDUCATIONAL DATA**

Circle the last grade completed:

Grammar School: 1 2 3 4 5 6 7 8      High School: 1 2 3 4      College: 1 2 3 4  
Trade School: 1 2 3 4      Correspondence School: 1 2 3 4

Special training or skills? \_\_\_\_\_

**GENERAL INFORMATION**

Have you ever been convicted of a felony? YES    NO    If the answer is yes, explain below \_\_\_\_\_

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

*\*Conviction of a crime will not automatically disqualify you from the job for which you are applying. Each conviction will be considered in respect to time, job relatedness and other relevant factors.*

**List the names of persons employed by us (if any) who can confirm the information on this application.**

EMPLOYEE NAME	OCCUPATION	HOW LONG KNOWN?

**PERSONAL REFERENCES**

Do Not Use Relatives or Former Employers

NAME	TELEPHONE #	OCCUPATION	HOW LONG KNOWN?

**MILITARY SERVICE**

Branch of service \_\_\_\_\_ Date of entry \_\_\_\_\_

Reserve Status \_\_\_\_\_ Date of discharge \_\_\_\_\_

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If a job is offered, are you able to provide verification of your legal right to work in the U.S.? YES NO

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We are an equal opportunity employer. I understand that this application is not an offer of employment, does not mean that any positions are available, and does not guarantee that I will be offered a job. I also understand that if hired, the Olympic Peninsula Humane Society may change the terms and conditions of my employment, if necessary and appropriate, that any employment is for indefinite period of time, and that both the Olympic Peninsula Humane Society and I have freedom to terminate such employment relationship whenever either choose to do so, with or without cause and with notice. I further understand

and acknowledge that no representative of the Olympic Peninsula Humane Society, other than the Executive Director, has any authority to enter into any agreement that is contrary to the language of this application.

I understand that material omissions or false statements on this application may be considered sufficient cause for denial of employment or dismissal, if and when discovered.

I also authorize the Olympic Peninsula Humane Society to contact the references and former employers listed.

I understand that I may be required to undergo a drug screening test as part of the employment process. An offer of employment will be withdrawn when the results of the drug screening test is positive for illegal drugs or for the presence of prescription drugs (such as barbiturates, amphetamines, opiates,

Signature of applicant: \_\_\_\_\_

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#### **AUTHORIZATION TO RELEASE EMPLOYMENT REFERENCE INFORMATION**

I understand that the Olympic Peninsula Humane Society will attempt to verify statements made on my application and made during my employment interview. When contacted by the Olympic Peninsula Humane Society, I give my permission for my former employers to answer any and all questions based upon information available to them in my prior employment records. I understand that it is possible that my prior employment records may not be accurate. Nonetheless, in consideration of the Olympic Peninsula Humane Society and all former employers for any liability as a result of the furnishings and receiving of this reference information. I understand that my failure to sign this reference release so the Olympic Peninsula Humane Society can contact references and make a full background check of my previous work history will be regarded as a withdrawal of my application for employment.

Signature of applicant: \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

***This application becomes void after 60 days unless renewed in writing.***

EQUAL OPPORTUNITY EMPLOYER