

# INGLIS PET HOTEL

3889 NORTH SOUTHBANK RD  
OXNARD CA 93036  
805 647-1990

## \* APPLICATION FOR EMPLOYMENT \*

Name \_\_\_\_\_  
Last First Middle

Nickname \_\_\_\_\_ date of birth \_\_\_\_\_

Home address \_\_\_\_\_  
Street City Zip

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Pager \_\_\_\_\_

Do you smoke \_\_\_\_\_

Hours you can be contacted \_\_\_\_\_ Email address \_\_\_\_\_

Relatives: Name address city state phone

Mother \_\_\_\_\_

Father \_\_\_\_\_

Sisters \_\_\_\_\_  
\_\_\_\_\_

Brothers \_\_\_\_\_  
\_\_\_\_\_

Are you a legal resident of this country? \_\_\_\_\_

Could you provide such documentation? \_\_\_\_\_

How would you get to work? \_\_\_\_\_

Do you have a valid Calif. Drivers license? \_\_\_\_\_

Drivers license number \_\_\_\_\_ Expiration date \_\_\_\_\_

Do you hold current insurance on the vehicle you will be driving \_\_\_\_\_

Name of insurance company \_\_\_\_\_

Address \_\_\_\_\_  
Number city state zip

Please list your past employment for the last five years

Bus. name \_\_\_\_\_ address \_\_\_\_\_

job title \_\_\_\_\_ how long \_\_\_\_\_ full or part \_\_\_\_\_

Bus. name \_\_\_\_\_ address \_\_\_\_\_

job title \_\_\_\_\_ how long \_\_\_\_\_ full or part \_\_\_\_\_

Bus. name \_\_\_\_\_ address \_\_\_\_\_

job title \_\_\_\_\_ how long \_\_\_\_\_ full or part \_\_\_\_\_

Bus. name \_\_\_\_\_ address \_\_\_\_\_

job title \_\_\_\_\_ how long \_\_\_\_\_ full or part \_\_\_\_\_

Bus. name \_\_\_\_\_ address \_\_\_\_\_

job title \_\_\_\_\_ how long \_\_\_\_\_ full or part \_\_\_\_\_

If you have not had any prior employment please explain:

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Have you ever been fired or asked to resign \_\_\_\_\_

If yes please explain \_\_\_\_\_

Please list three references other than family

Name \_\_\_\_\_ relationship to you \_\_\_\_\_ phone \_\_\_\_\_

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Circle the highest grade you completed 6 7 8 9 10 11 12 college 1 2 3 4

Special training \_\_\_\_\_

**WORKING WITH ANIMALS REQUIRES CERTAIN PHYSICAL REQUIREMENTS SUCH AS LIFTING, BENDING, PULLING OR BEING PULLED. DO YOU HAVE ANY PHYSICAL PROBLEMS THAT MAY LIMIT YOUR ABILITY TO DO ANY OF THE ABOVE MENTIONED ACTIONS?**

\_\_\_\_\_

I have no physical problems that would limit my ability to work with animals

Sign \_\_\_\_\_ Date \_\_\_\_\_

Do you have any allergies \_\_\_\_\_

When was your last tetanus shot \_\_\_\_\_

Have you ever worked with animals in a job situation \_\_\_\_\_

Are you interested in a career with animals \_\_\_\_\_

Do you at the present time own any animals \_\_\_\_\_

What kind \_\_\_\_\_

Why do you feel the position you are apply for would be good for you

\_\_\_\_\_

\_\_\_\_\_

What do you enjoy doing on your spare time?

\_\_\_\_\_

Indicate you availability to work the following

Full time \_\_\_\_\_ (40 hrs per week) Part time \_\_\_\_\_ (fewer than 40 hrs per week)

Weekends \_\_\_\_\_ What is your acceptable hourly wage \_\_\_\_\_

THE POSITION FOR WHICH YOU ARE APPLYING REQUIRES THAT YOU BE ABLE TO LIFT. PLEASE CIRCLE WHAT YOU FEEL YOU WOULD BE COMFORTABLE LIFTING AND HOW OFTEN.

10LB    20LB    30LB    40LB    50LB    70LB    100LB

SELDOM                      OCCASIONALLY                      FREQUENTLY

On a scale of 1 – 10 how do you rate yourself as far as neat organized. \_\_\_\_\_

How do you feel you take directions from management (circle one)

Very well                      well                      average                      fair                      not well at all

How well do you feel you work with the public

1. I would prefer not to \_\_\_\_\_
2. I do not mind from time to time but I prefer working with animals \_\_\_\_\_
3. I can do anything well \_\_\_\_\_
4. I enjoy working with people as much as animals \_\_\_\_\_

Do you have any issues with wearing a uniform at work \_\_\_\_\_

Number in order from 1 to 6 your favorite animals \_\_\_\_\_ large animals \_\_\_\_\_ fish  
\_\_\_\_\_ cats \_\_\_\_\_ reptiles \_\_\_\_\_ dogs \_\_\_\_\_ birds

Do you speak any language other than English \_\_\_\_\_

I have filled out this application to the best of my ability and all of the answers have been answered truthfully

Signed \_\_\_\_\_ Date \_\_\_\_\_