

# DOG DAYS OF SOMMER EMPLOYEMENT APPLICATION

## PERSONAL INFORMATION

NAME		DATE OF BIRTH	SOCIAL SECURITY NUMBER
ADDRESS (number, street, building)			
CITY		STATE	ZIP CODE
PHONE 1	PHONE 2	EMAIL ADDRESS	

Have you ever been convicted of a crime other than a minor traffic incident?  Yes  No

If Yes, please explain:

Not applicable

## DESIRED EMPLOYMENT

EMPLOYMENT TYPE	POSITION APPLYING FOR	DESIRED SALARY	DATE YOU CAN START
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time			

## EDUCATION (starting from the latest)

School	Location	Date Graduated	Attainment

## WORK EXPERIENCE

Company Name	Period	Position	Reason for Leaving

May we contact your present employer?  Yes  No If No, why? \_\_\_\_\_

IF Yes, name of Supervisor: \_\_\_\_\_

Contact Number: \_\_\_\_\_

## MAJOR SKILLS

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*I certify that the information contained in this application is accurate and correct. I understand that any omission or erroneous may be ground for dismissal.*

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_