

North Airline Animal Hospital

Today's Date _____

Application For Employment

Federal and state laws prohibits discrimination of employment because of sex, age, race, color, religious creed, marital status, national origin, ancestry, disability, or handicap.

Applications must be filled out completely.

Personal Information

Name _____
(Last) (First) (Middle)

Address _____
(Street, City, State, Zip Code)

Home telephone _____ Cell _____

e-mail _____

Drivers License # / State _____ Social Security # _____

Are you a US citizen _____ Work permit if under 18 years of age _____ Date of Birth _____

Have you ever been convicted of a felony? _____ if yes, specify _____

Position desired: _____ Full time / Part time: _____

Can you work 40 hours or more a week? _____ Can you work weekends and holidays? _____

Can you work before 7:30am? _____ Can you stay past 5:30pm? _____

Please list the times you are available to work each day.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Do you have your own transportation? _____ Date you can start _____ Desired Rate of Pay _____

Are you currently employed? _____ If so may we inquire of you present employer? _____

Have you ever applied to this company before? _____ If yes, When? _____

Referred to this office by: _____

Have you ever worked for a veterinarian before? _____ if yes, when? _____

Position _____ Doctor's Name _____ Phone Number _____

Reason for Leaving: _____

Why do you want to work with this office?

Education	Name and Location of School	Number of Years Attended	Did you Graduate?	Subjects Studied
High School				
College				
Trade School				

Previous Employer

(List the last three employers starting with the most recent)

Date (Month and Year)	Name & Phone Number of Employer	Salary	Position	Reason for Leaving
From:	Name:			
To:	Phone #:			
From:	Name:			
To:	Phone #:			
From:	Name:			
To:	Phone #:			

**** Please list all dates and reasons for any gaps between your work history.**

References

(List three references NOT related to you)

Name _____ Years Known _____ Phone Number _____

Name _____ Years Known _____ Phone Number _____

Name _____ Years Known _____ Phone Number _____

I certify that the statements I have made are true and correct to the best of my knowledge. I give my permission for North Airline Animal Hospital to perform reference check & drug testing prior to employment as well as after employment.

Applicant Signature _____ Date _____

DISCLOSURE REGARDING CONSUMER REPORTS

North Airline Animal Hospital
5495 Airline Drive | Bossier City, LA 71111
318-747-1099

NORTH AIRLINE ANIMAL HOSPITAL Will Obtain a Background Check

You acknowledge and understand that in connection with your application for employment with NORTHAIRLINE ANIMAL HOSPITAL (including any independent contract for services) or when deciding whether to modify or continue your ongoing employment, if hired, we may obtain a "consumer report" and/or an "investigative consumer report" on you from Trak-1, a consumer reporting agency, or from any third party, in strict compliance with both state and federal law.

Consumer Report Defined

A consumer report is any communication of information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used for purposes of serving as a factor in establishing your current and/or continuing eligibility for employment purposes. A common term for a consumer report is a "background check report."

Investigative Consumer Report Defined

An investigative consumer report is obtained through personal interviews with individuals who may have knowledge of your character, general reputation, personal characteristics, or mode of living. An investigative consumer report might include, for example, calls to the personal references you provide or conversations with former supervisors or colleagues where you worked.

Reports May Contain

The consumer reports or investigative consumer reports may contain public record information which may be requested or made on you including, but not limited to: consumer credit, criminal records, civil cases in which you have been involved, driving history records, current motor vehicle insurance coverage information, education records, previous employment history, workers compensation claims history, social security traces, military records, professional licensure records, eviction records, drug testing, government records, and others. You further understand that these reports may include experience information along with reasons for termination of past employment. You also acknowledge and understand that information from various federal, state, local and other agencies which contain information about your past activities will be requested, and that a consumer report containing injury and illness, drug testing, or other medical records and medical information may be obtained only after a tentative offer of employment has been made.

Your Rights as a Consumer

You are hereby notified that you have the right to make a timely request for a copy of the scope and nature of the above investigative background report and/or a complete copy of your consumer report contained in Trak1's files on you at the time of your request by providing proper identification. You are further notified that, prior to being denied employment based in whole or in part on information obtained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the consumer reporting agency and a description in writing of your rights under the Fair Credit Reporting Act. Correspondence to Trak-1 should be forwarded to:

Trak-1 | Consumer Relations | 7131 Riverside Parkway | Tulsa, Oklahoma 74136

800-600-8999 | CustomerCare@trak-1.com

Your signature below indicates the following:

- 1) You authorize, without reservation, Trak-1 or any third party to obtain and/or furnish to NORTH AIRLINE ANIMAL HOSPITAL any records or information referenced in the provided disclosure statement for employment related purposes;
- 2) You authorize ongoing procurement of any records or information, reports and records at any time during your employment to the extent allowed by law;
- 3) You authorize the use of a fax or photocopy of this authorization as having the same authority as the original;
- 4) You authorize and request, without reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agency, or other entity, person or agency having knowledge about you to furnish NORTH AIRLINE ANIMAL HOSPITAL and/or Trak-1 with any and all background information in their possession regarding you for these stated employment purposes;
- 5) You understand and agree that in connection with your employment your consumer report information, whether investigative or otherwise, may be shared with and/or reviewed by all applicable parties involved in the hiring process;
- 6) You have read and fully understand the foregoing disclosure and this authorization.
- 7) You certify that all the information you have provided on this form is true, complete, correct and accurate; and
- 8) You certify you have received, reviewed and understand the "Summary of Your Rights under the Fair Credit Reporting Act (15U.S.C. §1681 et seq.)" which is published by the Federal Trade Commission to help you know your rights.

Customer Signature: _____ Date: _____