

Peninsula Pups Doggie Daycare, Inc.  
 801 W. 12<sup>th</sup> St., Erie, PA 16501  
 814-454-7877  
 Fax: 814-454-7866

PLEASE PRINT  
 LEGIBLY AND  
 COMPLETE ALL  
 SECTIONS

APPLICATION FOR EMPLOYMENT  
 APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE ALL PAGES

DATE \_\_\_\_\_

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

Address \_\_\_\_\_  
Number Street City State Zip

How long have you lived at this address? \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Are you under the age of 18? \_\_\_\_\_ Do you have friends/family that work at Peninsula Pups and whom? \_\_\_\_\_

Position applied for \_\_\_\_\_

Hourly wage desired \_\_\_\_\_

Days/hours available to work

No Preference\_\_ Thur \_\_\_\_\_

Mon \_\_\_\_\_ Fri \_\_\_\_\_

Tue \_\_\_\_\_ Sat \_\_\_\_\_

Wed \_\_\_\_\_ Sun \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_

Employment desired (**we do not hire seasonal employees**)  FULL-TIME  PART-TIME  FULL- OR PART-TIME

When are you available to begin work? \_\_\_\_\_

Are you legally able to work in the United States?  Yes  No

TYPE OF SCHOOL	NAME OF SCHOOL	CITY AND STATE	YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Graduate School				
Trade School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME?  Yes  No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. \_\_\_\_\_

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES?  Yes  No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?  Yes  No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

**Work Experience**

Please list your work experience for the **past five years** beginning with your most recent job held. If this would be your first job, write N/A. **Attach additional sheets if necessary.**

Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address City, State, Zip Code		From To	Start Final
Phone number	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____ _____ _____			

Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address City, State, Zip Code		From To	Start Final
Phone number	Your Last Job Title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____ _____ _____			

Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address City, State, Zip Code		From To	Start Final
Phone number	Your Last Job Title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____ _____ _____			

Please list two professional references other than friends or relatives.

Name \_\_\_\_\_

Name \_\_\_\_\_

Position \_\_\_\_\_

Position \_\_\_\_\_

Company \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Telephone (    ) \_\_\_\_\_

Telephone (    ) \_\_\_\_\_

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications and/or to describe what differentiates you from other applicants.

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May we contact your present employer?     Yes     No

May we contact your previous employers?     Yes     No

Did you complete this application yourself     Yes     No

If not, who did?

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**PLEASE READ CAREFULLY**

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**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Peninsula Pups Doggie Daycare, Inc. (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Peninsula Pups Doggie Daycare, Inc., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President of the Company. Both the undersigned and Peninsula Pups Doggie Daycare, Inc. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a reporting agency an investigative report including information as to my criminal and credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of ninety days (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

**Signature of applicant** \_\_\_\_\_ **Date:** \_\_\_\_\_

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This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.