

Waggin Tails Doggie Dude Ranch

6249 Nesbitt Road
Madison, WI 53719
Phone: 608-271-2412 X3

Instructions: Print clearly in black or blue ink. Answer all questions. Sign and date the form.

PERSONAL INFORMATION:

First Name: _____ Middle Name: _____ Last Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone Number: (____) _____

Are you eligible to work in the United States? Yes ___ No ___

Are you under the age of 18? Yes ___ No ___

Have you ever applied to, or worked for Waggin Tails before? Yes ___ No ___

If yes, please explain and give reason for leaving (include date):

Do you have any friends, relatives, or acquaintances who are currently working at Waggin Tails or who have worked at Waggin Tails in the past? Yes ___ No ___

If yes, state name and relationship: _____

If hired, would you have reliable transportation to/from work? Yes ___ No ___

If hired, would you be willing to submit to and pass a controlled substance test? Yes ___ No ___

Have you been convicted of or pleaded no contest to a felony within the last five years? Yes ___ No ___

If yes, please explain: _____

POSITION/AVAILABILITY:

Position Applying For: _____

Are you seeking part-time or full-time work? _____

Are you seeking long-term or short-term employment? _____

If short-term, please give end date and explain: _____

Days/Hours Available:

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Sunday _____

Can you work weekends? Yes ____ No ____

Can you work Holidays? Yes ____ No ____

Are you available to work overtime? Yes ____ No ____

What date are you available to start work? _____

Desired wage? _____

Education:

	Name and Location	Start Date – End Date	Major/Subjects of Study
High School			
College or University			
Specialized Training, Trade School, etc...			
Other Education (Ex: Licenses, Skills, Training, Awards)			

Please list any special skills and qualifications that may contribute to your abilities in performing your position here at Waggin Tails:

EMPLOYMENT HISTORY: Please list all previous employers in the last five years; please add any additional paper needed.

Present or Most Recent Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities: _____

Salary Start: _____ Salary End: _____

Reason for Leaving: _____

=====

Previous Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities: _____

Salary Start: _____ Salary End: _____

Reason for Leaving: _____

=====

Previous Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities: _____

Salary Start: _____ Salary End: _____

Reason for Leaving: _____

May We Contact Your Current Employer?

Yes _____ No _____

If no, please explain _____

References:

	Name	Relationship/Business	Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature _____

Date _____