KULSHAN VETERINARY HOSPITAL

Employment Application

8880 Benson Road, Lynden WA 98264

6620 Portal Way, Ferndale WA 98248

(360) 354-5095

www.KulshanVet.com

We.Care@KulshanVet.com



Please complete this application by typing or clearly printing. Fully and accurately complete all application questions, even if submitting your resume. Use additional sheets if more space is required.

APPLICANT IN	IFORMAT	ION																		
Last Name							First								Date					
Street Addres	S														Apartment/Unit #					
City	·	,					State					Zip								
Phone							Email Address													
Position apply	ing for																			
Do you have a legal right to work in the United States?				No If you are un proof of eligi				unde eligibil	der 18 years of age, can you pro bility to work?				de require	ed	Yes 🗆	No 🗆				
Have you ever worked for this company? Yes				Yes 🗌	No 🗌 If so, when				nen?	?										
Are you available to work: Full-time					Full-time	Part-time Tem			mpor	ary	Please	e list th	ne hours	s and day	ys yo	ou are avail	lable:			
EDUCATION																				
High School						Address														
From		То		Did y	ou graduate	?	Yes		ı	No 🗆		egree								
College						Add	lress													
From		To Did you graduate			?	Yes 🗌 No			No 🗆	Degree										
Graduate School																				
From		To Did you graduate			?	? Yes □ No			No 🗆	☐ Degree										
REFERENCES																				
Please list three p	orofessional i	reference	es.																	
Full Name									R	Relationship										
Company								F			Phone									
Address																				
Full Name									R	Relationship										
Company									Р	Phone										
Address																				
Full Name										R	Relationship									
Company										Р	hone									
Address										·										

List experience the employment. A r Resume" in lieu o	esume wi	ill not s	s position. Begin with your is substitute for the information application.	most recei on require	nt experience. List d in this section. R	all jobs separately and esumes may be attach	identify gaps in ed but do not write "See
Company					Phone		
Address					Supervisor		
Job Title							
Responsibilities							
From	Т	o	Reason for Leaving				
May we contact y	our previ	ous su	pervisor for a reference?	Yes 🗆	No 🗆		
Company					Phone		
Address					Supervisor		
Job Title							
Responsibilities							
From	Т	ō	Reason for Leaving				
May we contact y	our previ	ous su	pervisor for a reference?	Yes 🗆	No 🗆		
Other Training, B	usiness or	Tech S	School attended:				
Additional Experi	ence: (vol	unteer	, internship, etc)				
License/Registrat	ion/Certif	icate:	Description:	Licen	se#	Expiration	State Issued
NOTICE TO APPLI	ICANTS						
Drug and Alcohol test alcohol testing.	ing is a prere	equisite 1	for, and a condition of employmen	it. Our comp	any conducts pre-emplo	oyment, post-accident, and r	reasonable suspicion drug and
	ospital routir	naly saak	ks information regarding the crimir	aal rocords o	f ioh applicants who mo	at the basic critoria for the r	nosition in compliance with
applicable Washingto	•	ilely seer	inormation regarding the crimin	iai recorus o	i Job applicants who me	et the basic criteria for the p	Joseph III compliance with
			the application and accompan		_		
past employers to r	release info	ormatio		les and othe	er related information	n regarding my employm	ent. I willingly, knowingly, and
			d agree to waive any legal clair cknowledge that my employme	-			and any individual providing e company is free to terminate
			ime, with or without reason, a				
Signature:						Date:	

PREVIOUS EMPLOYMENT