**Employment Application**

**PLEASE PRINT**

**PERSONAL INFORMATION**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position desired? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Can you perform the essential functions, with or without accommodation, of the position for which you are applying?
YES [ ] NO [ ]

Are you legally eligible to be employed in the United States? YES [ ] NO [ ] *(Proof of identity and eligibility will be required upon employment)*

Are you at least 18 years or older? YES [ ] NO [ ]  *(If no, you may be required to provide authorization to work.)*

Do you have any relatives or friends who work for the Company? YES [ ] NO [ ] If yes, please list:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a reliable means of transportation to, from, and between clients? YES [ ] NO [ ]

Are you available to work: MORNINGS [ ] MIDDAY [ ] NIGHTS [ ] WEEKENDS [ ]  HOLIDAYS [ ]

Days and Hours Available:(If employed, notification must be provided in writing should availability change.)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|  |  |  |  |  |  |  |

|  |
| --- |
| Are you presently employed? YES [ ] NO [ ] If yes, may we contact your employer? YES [ ] NO [ ] If presently employed, why are you considering leaving?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Do you belong to any professional, trade, business or civic organizations that deal with the position for which you are applying? YES [ ] NO [ ] If yes, please explain and list offices held: (Omit any organization which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **EDUCATION** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Name and Location of School | Course ofStudy | No. of YearsCompleted | Diploma orDegree Received |
| High School |  |  |  |  |
| College |  |  |  |  |
| Vocational orTrade School |  |  |  |  |
| GraduateWork |  |  |  |  |

|  |
| --- |
| Have you completed any special courses, seminars and/or training directly related to the position for which you are applying? YES [ ] NO [ ] If yes, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Please list any other experience, job-related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Please check what animals you feel comfortable and/or have experience caring for: Dogs [ ] Cats [ ] Rabbits [ ] Parrots [ ] Horses [ ] Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Snakes [ ] Pocket Pets [ ] Lizards [ ] Small Farm Animals [ ] Chickens [ ] **EMPLOYMENT**Start with your current or most recent position |

|  |  |
| --- | --- |
| Name of Employer | Telephone Number |
| Full Address (Including Street, City, State & Zip) | Supervisor's Name and Title |
| Dates Employed | From Month/Day/Year  | To Month/Day/Year |
| Describe the Work Performed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Use an additional sheet of paper if more space is necessary.**PROFESSIONAL REFERENCES**Give three references not related to you |

|  |  |
| --- | --- |
| Name | Occupation |
| Full Address (Including Street, City, State & Zip)Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_State\_\_\_\_\_ Zip\_\_\_ | Telephone Number |
| Name | Occupation |
| Full Address (Including Street, City, State & Zip)Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_State\_\_\_\_ Zip\_\_\_\_ | Telephone Number |
| Name | Occupation |
| Full Address (Including Street, City, State & Zip)Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_ State\_\_\_\_\_Zip\_\_\_\_\_ | Telephone Number |  |
| **IMPORTANT, PLEASE READ AND SIGN**I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for The Savvy Sitter (The Company) to hire me. If I am hired, I understand that either the Company or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of the Company has the authority to make any assurance to the contrary.I attest with my signature below that I have given the Company true and complete information on this application. No requested information has been concealed. I authorize the Ca to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*We are an equal opportunity employer and comply with all applicable federal, state, and local regulations.* |