

If hired how long do you want to remain in your position? ___A few months ___a year ___5 years?

What is your longest term employment? _____ Name of Business_____

If you had an activity that you wanted to attend on a day when you were scheduled to work, how would you deal with it?

Why do you feel you would be a good candidate for this job? _____

Work History (begin with the most recent)

Name of Company/Address	Supervisor	Phone No.
Type of Business	Date employed From _____ To _____	Earnings At hire _____ At termination _____
Exact job title	Reason for Termination	

Name of Company/Address	Supervisor	Phone No.
Type of Business	Date employed From _____ To _____	Earnings At hire _____ At termination _____
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Name of Company/Address	Supervisor	Phone No.
Type of Business	Date employed From _____ To _____	Earnings At hire _____ At termination _____
Exact job title	Reason for Termination	

Affidavit

I certify that the answers given by me to the foregoing questions and statement are true and correct without consequential omissions of any kind whatsoever. I agree that All Seasons Pet Care shall not be liable in any respect if my employment is terminated because of falsity of statements, answers or omissions, made by me in this questionnaire. I understand that there is no express or implied contract of employment and that if employed I have been hired at the will of the employer and that my employment may be terminate at will, at any time; and with or without cause. I further consent to a background check and drug testing and I understand this is a condition of employment with All Seasons Pet Care

Finally I understand that all All Seasons Pet Care property must be returned and my indebtedness to the company must be paid before my final check(s) will be issued. I authorize all Seasons Pet Care to deduct from the final paycheck(s) all moneys due and owing to the company for any damages due to any loss of property owed to All Seasons Pet Care.

Name:(Print) _____

E-Mail _____

Signature _____

Date _____