

APPLICATION FOR EMPLOYMENT

All offers of employment are conditioned on the provision of satisfactory evidence of identity and legal eligibility to work in the United States, successful completion of a drug screening test, pre-employment physical exam, and background investigation including livescan fingerprinting.

PLEASE COMPLETE PAGES 1-4.		DATE		
Name				
Last	t	First	Middle	
Present				
		Street	City	State Zip
How long				
Telephone ()				
If under 18, if hired	d can you, after emp	oloyment, submit a work	permit?	_
Position applied for	or			
How many hours can you work weekly? Can you work nights? Weekends?				
Employment desir	ed □ FULL-TIME (ONLY □ PART-TIME O	NLY □ FULL - OR	- PART-TIME
When available fo	r work?			
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School		,		
College				
Bus. or Trade School				
Professional				
School				
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Please list two references other than relative	s or previous employ	ers.				
Name	Name					
Address						
Telephone ()						
An application 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 for the specific position for which you are applying.						
WORK Please list your work experience for the past ten years beginning with your EXPERIENCE most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.						
Name of Employer: Address:	Name of Last Supervisor	Employment Dates				
City, State, Zip, Code:		From				
Phone Number:		То				
	Your last job title					
Reason for leaving (be specific)						
List the jobs you held, duties performed, skills you worked at this Employer.	s used or learned, ad	dvancements or pro	omotions while			

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Name of Employer:	Name of Last	Employment			
Address:	Supervisor	Dates			
City, State, Zip, Code:		From			
Phone Number:		То			
	Your last job title				
Reason for leaving (be specific)					
List the jobs you held, duties performed, skills you worked at this Employer.	s used or learned, ad	vancements or p	romotions while		
WORK Please list your work experied EXPERIENCE recent job held. If you were sadditional sheets if necessary	self-employed, give fi	0 0	,		
Name of Employer:	Name of Last	Employment			
A 1.1	Supervisor	Dates			
Address:	Supervisor	Dates From			
City, State, Zip, Code:	Supervisor	From			
	·				
City, State, Zip, Code: Phone Number:	Supervisor Your last job title	From			
City, State, Zip, Code:	Your last job title	From To	promotions		
City, State, Zip, Code: Phone Number: Reason for leaving (be specific) List the jobs you held, duties performed, skills	Your last job title	From To	promotions		
City, State, Zip, Code: Phone Number: Reason for leaving (be specific) List the jobs you held, duties performed, skills	Your last job title s used or learned, ad	From To vancements or p	promotions		
City, State, Zip, Code: Phone Number: Reason for leaving (be specific) List the jobs you held, duties performed, skills while you worked at this Employer.	Your last job title sused or learned, ad	From To vancements or p Employment Dates	promotions		
City, State, Zip, Code: Phone Number: Reason for leaving (be specific) List the jobs you held, duties performed, skills while you worked at this Employer. Name of Employer: Address: City, State, Zip, Code:	Your last job title s used or learned, ad	From To vancements or p Employment Dates From	promotions		
City, State, Zip, Code: Phone Number: Reason for leaving (be specific) List the jobs you held, duties performed, skills while you worked at this Employer. Name of Employer: Address:	Your last job title sused or learned, ad Name of Last Supervisor	From To vancements or p Employment Dates	promotions		
City, State, Zip, Code: Phone Number: Reason for leaving (be specific) List the jobs you held, duties performed, skills while you worked at this Employer. Name of Employer: Address: City, State, Zip, Code:	Your last job title s used or learned, ad	From To vancements or p Employment Dates From	promotions		

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List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this Employer.
May we contact your present employer? ☐ Yes ☐ No Did you complete this application yourself? ☐ Yes ☐ No If not, who did?
I attest that the foregoing is true and accurate. I understand that if I provide false information on this application I will not be considered for employment and if any falsehood is discovered after I am hired I will be subject to termination.
Signature Date
Mail, fax or email this application to:

Silicon Valley Animal Control Authority
Attn: Executive Director
3370 Thomas Rd. Santa Clara, CA 95054
Phone: 408-764-0344 Fax: 408-980-9192
dan@svaca.com

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