

SAVE, A Friend to Homeless Animals
Employment Application



APPLICANT INFORMATION

Last Name		First		MI	Date		
Street Address				Apt #			
City		State		Zip			
Phone			E-mail				
Date Available		Soc Sec #			Desired Hourly Wage		
Position Applying For:				Full Time		Part Time	
Days and hours available for work:							
	SUN	MON	TUE	WED	THU	FRI	SAT

Are you a citizen of the United States? Yes [] No [] If no, are you authorized to work in the U.S.?

Have you ever worked for SAVE? Yes [] No [] If so, when?

Do you have a valid driver's license? Yes [] No [] What is your means of transportation to work?

Do you have any current allergies to cats or dogs? Yes [] No [] If yes, explain:

Are you able to lift up to 40 pounds? Yes [] No [] Note: This may not disqualify you from employment.

EDUCATION

High School		Address					
From	To	Did you graduate? Yes [] No []					
College		Address					
From	To	Did you graduate? Yes [] No []					
Other		Address					
From	To	Did you graduate? Yes [] No []					

REFERENCES (Please list three professional references)

Name		Relationship					
Company		Phone #					
Address							
Name		Relationship					
Company		Phone #					
Address							
Name		Relationship					
Company		Phone #					
Address							

PREVIOUS EMPLOYMENT (start from the current or most recent position)

Company		Phone #	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? Yes No			
Company		Phone #	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? Yes [] No []			
Company		Phone #	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? Yes [] No []			

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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Email application to: save@savehomelessanimals.org

or fax 609-309-5796

mail to: SAVE 1010 Route 601, Skillman, NJ 08558