



NAME \_\_\_\_\_

DATE \_\_\_\_\_

POSITION APPLYING FOR \_\_\_\_\_

**1. PLEASE WRITE OUT YOUR GOALS FOR THE POSITION FOR WHICH YOU ARE APPLYING:**

---

---

---

---

---

---

**2. PLEASE WRITE OUT YOUR UNDERSTANDING OF THE PURPOSE OF A VETERINARY PRACTICE:**

---

---

---

---

---

**3. PLEASE WRITE A BRIEF LETTER TO A CLIENT WHO HAS AN OVERDUE ACCOUNT**  
(Please do this even though you may not be handling financial matters in the performance of your job)

---

---

---

---

---

---

---

---

---

---

(PLEASE USE OTHER SIDE OF PAGE IF NEEDED)

**NAME AND ADDRESS**

Name: \_\_\_\_\_  
Last First Middle Social Security Number

Current Address \_\_\_\_\_  
Number Street  
\_\_\_\_\_  
City Parish/County State Zip

Telephone Number: \_\_\_\_\_ Cell Number \_\_\_\_\_

Former Address \_\_\_\_\_  
Number Street  
\_\_\_\_\_  
City Parish/County State Zip

**POSITION DESIRED**

What position are you applying for? \_\_\_\_\_

Salary Expectations? \_\_\_\_\_

Where did you hear about the job opportunity? \_\_\_\_\_

**WORK SCHEDULE**

What type of Employment?  Full Time  Part Time  Temporary

When could you start? \_\_\_\_\_

What Schedule are you available for? (Include a.m. or p.m.)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From / To	From / To	From / To	From / To	From / To	From / To	From / To

Are You Currently Employed?  Yes  No

Are You Currently a Student?  Yes  No

**Employment History**

List the most recent employer or last employer first. Include military service or any self-employed or unemployment periods. You *must* account for the past 10 years or since completing school, whichever is shorter. Use additional pages if necessary.

**Present or Last Employer**

Company \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Last Salary: \_\_\_\_\_  
Last Position Held \_\_\_\_\_  
Last Supervisor's Name \_\_\_\_\_  
*Be Specific* Why did you leave? \_\_\_\_\_  
\_\_\_\_\_  
*Be Specific* Liked most about job? \_\_\_\_\_  
\_\_\_\_\_  
*Be Specific* Liked least about job? \_\_\_\_\_  
\_\_\_\_\_

**Past Employer**

Company \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Last Salary: \_\_\_\_\_  
Last Position Held \_\_\_\_\_  
Last Supervisor's Name \_\_\_\_\_  
*Be Specific* Why did you leave? \_\_\_\_\_  
\_\_\_\_\_  
*Be Specific* Liked most about job? \_\_\_\_\_  
\_\_\_\_\_  
*Be Specific* Liked least about job? \_\_\_\_\_  
\_\_\_\_\_

**PERSONAL REFERENCES**

Give names of 2 persons, not relatives or former CAMC employees, who you have known for 5 years or more

Name\_\_\_\_\_

Name\_\_\_\_\_

Address\_\_\_\_\_

Address\_\_\_\_\_

City/State/Zip\_\_\_\_\_

City/State/Zip\_\_\_\_\_

Phone Number\_\_\_\_\_

Phone Number\_\_\_\_\_

Number of Years Known\_\_\_\_\_

Number of Years Known\_\_\_\_\_

**In Case of Emergency, Notify**

Name\_\_\_\_\_

Phone Number\_\_\_\_\_

Address\_\_\_\_\_

Work/Cell Number\_\_\_\_\_

City/State/Zip\_\_\_\_\_

**CONDITIONS OF EMPLOYMENT**

We set high standards for our employees and require compliance with these standards as a condition of employment. You need to carefully consider what will be required before accepting a position with us. As an employee, you would be expected to comply in full. You need to know and understand that we will require you to:

- Meet performance standards of position
- Work hours as scheduled – report to work on time
- Take direction from supervisors, and execute that direction to the best of your ability
- Maintain a positive, enthusiastic attitude at all times. Be a cooperative member of our team.
- Train, as needed, to keep a high performance level on your job.
- Maintain a business-like, professional appearance (dress and grooming)

Would you be able to comply with all requirements as listed?  Yes  No

If “no”, or you have any concerns about being able to comply with any of these requirements, please explain:

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

**EDUCATION**

**IF YOU ATTENDED HIGH SCHOOL**

Name of High School \_\_\_\_\_

City and State \_\_\_\_\_

Graduated?  Yes  No

**IF YOU ATTENDED COLLEGE**

Last College Attended \_\_\_\_\_

City and State \_\_\_\_\_

Graduated?  Yes  No

Degree (if applicable) \_\_\_\_\_

**Do you have any other kind of training? (Please include seminars and workshops)**  Yes  
 No

If "yes", what was it? Please explain \_\_\_\_\_

**Have you ever been convicted of a crime or a violation, other than a minor traffic violation in the past 7 years?**

Yes  No

If "YES", Please list all convictions, starting date, nature of offense and where they occurred. (NOTE: A conviction will not automatically disqualify you from employment)

**Are you legally eligible to work in the United States?**  Yes  No

Document Number (if Applicable) \_\_\_\_\_

**Can you perform the essential functions of the job for which you have applied?**  Yes  
 No

What accommodations, if any, do you need to perform this work? \_\_\_\_\_

**Are you currently on any kind of medication that would affect your ability to perform this job?**  Yes  No

If "yes", please give a brief description

**Any additional comments or information, please write here.** \_\_\_\_\_