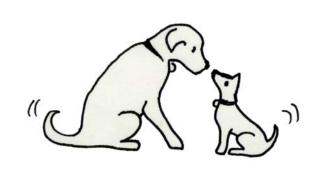
## Wiggly Tails, Inc.

- A Waggin' Good Time!

1915 Holste Road, Northbrook, IL 60062 Phone: 847.272.4141 Fax: 847.272.4234 www.wigglytails.com info@wigglytails.com



## Employment Application

APPLICANT INFORMATION							
Full Name:		Date:					
SSN:	Driver's Lice	nse#/State:					
Address:							
City:	State:	Zip Code:					
Home Phone #:	Cell #:	Cell #:					
E-mail Address:							
Position Applying For: (Check one)		Desired Salary: \$					
☐ Dog Handler ☐ Bather ☐ Groom	mer 🗌 Night Staff	per hour					
Days Available	Specific Times Available						
Monday YES NO							
Tuesday YES NO							
Wednesday YES NO							
Thursday YES NO							
Friday YES NO							
Saturday YES NO							
Sunday YES NO							
Date Available To Start:							
Are you available to work holidays and pear	k times (spring break)?	YES NO (Explain Why)					
Are you a citizen of the United States?	☐ YES ☐ NO	Are you at least 16 years of age?					
If no, are you authorized to work in the U.	☐ YES ☐ NO						
Have you ever been convicted of a felony? YES NO							
If yes, please explain:							

EDUCATION							
High School:							
Address:							
City:	T	State:	Zip Code:				
From:	То:	Did you graduate?  Degree:	☐ YES ☐ NO				
College:							
Address:							
City:	1	State:	Zip Code:				
From:	То:	Did you graduate? Degree:	☐ YES ☐ NO				
Other:							
Address:							
City:	T	State:	Zip Code:				
From:	To:	Did you graduate? Degree:	☐ YES ☐ NO				
	15555						
		AL SKILLS					
Have you ever worked w	ith dogs pefore?	ES   NO					
If Yes, please explain:							
Do you have any comput	ter skills? (]f Yes, please ex	plain):					
Do you have customer service experience? (If Yes, please explain):							
Please explain why you would be a good choice for Wiggly Tails, Inc.:							
	REFER	ENCES					
Name:			Relationship:				
Address:							
City:		State:	Zip Code:				
Home Phone #:		Cell #:					
Name:		Relationship:					
Address:							
City:		State: Zip Code:					
Home Phone #:		Cell #:					
Name:	Name: Relationship:						
Address:			<u> </u>				
City:		State:	ate: Zip Code:				
Home Phone #:		Cell #:					

PREVIOUS EMPLOYMENT							
Company:							
Address:							
City:			State:	Zip	Code:		
Phone:			Supervisor:	•			
Job Title:			Start Salary:		End Salary:		
Responsibilities:							
From:	To:	Reason for	· Leaving:				
May we contact your previous supervisor for reference? YES NO							
Company:							
Address:							
City:			State:	Zip	Code:		
Phone:			Supervisor:				
Job Title:			Start Salary:		End Salary:		
Responsibilities:							
From:	To:	Reason for	· Leaving:				
May we contact yo	our previous supervi	sor for refe	rence? 🗌 YES 🗌	NO			
Company:							
Address:							
City:		State:	Zip	Code:			
Phone:		Supervisor:					
Job Title:		Start Salary:		End Salary:			
Responsibilities:							
From:	To:	Reason for	· Leaving:				
May we contact yo	our previous supervi	sor for refe	rence? 🗌 YES 🗌	NO			
DISCLAIMER AND SIGNATURE							
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:				D	pate:		