

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, sex, marital status, national origin, age, disability, ancestry or military status.

Name	Date of application				
	LAST	FIRST	MIDDLE		
Address		City		State	_Zip
Telephone			_Email		

1. General Information:

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation? \Box Yes \Box No

Have you been convicted of any felonies other than minor traffic violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying.) \Box Yes \Box No If yes, explain:

2. Education & Training:

Circle last grade com	pleted - Grade 1	23456789	0 10 11 12 College	1 2 3 4 Masters		Doctorate	
Name & Address of School				Major Course stud	Gradu ied or degr		verage Grade
Last High School Atten	ded/Address:						
College or University/Ad	ldress:						
College or University/Ac etc.)/Address: List any scholarships, a	·						
3. Skills: Please lis	st any skills you have	that are appropriate f	for the position you are	e applying for:			
If required, will you wor	k? Rotati Evenir	ng shifts 🔲 YES Igs 🗌 YES	NO Saturd	· —		equirements:	
Hours of availability:						1	
Mon	Tues	Wed	Thurs	Fri	Sat	Sun	
Position applying for, b	e specific:						
Qualifications / Farm Ai	nimal Experience: Ve	u may wish to list sig	nificant experience, int	aracts &	Date	you can star	t:

4. Employment History:

Starting with your PRESENT or MOST RECENT EMPLOYER list in consecutive order ALL EMPLOYMENT for at least the past TWO employers. If currently employed, may we may we contact your employer? □Yes □No

		PRESENT OR MOST RE	CENT EMPLOYER				
FULL NAME OF COMPANY		(AREA CODE)	TELEPHONE		Salary	Employed Mo/Yr Mo/Yr	
STREET ADDRESS	CITY	STATE		ZIP			
NAME & TITLE OF SUPERVISOR		TITLE OF YOUR POSITION			Reason for Lea	iving:	
LIST JOBS HELD, DUTIES PERFORMED, SKILLS USE	D, & PROMOTIONS WHILE EMPLOYE	ED AT THIS COMPANY:					
FULL NAME OF COMPANY		(AREA CODE)	TELEPHONE		Salary	Employed Mo/Yr Mo/Yr	
STREET ADDRESS	CITY	STATE		ZIP			
NAME & TITLE OF SUPERVISOR	TITLE OF YOUR POSITION				Reason for Leaving:		
LIST JOBS HELD, DUTIES PERFORMED, SKILLS USE	D, & PROMOTIONS WHILE EMPLOYE	ED AT THIS COMPANY:					

5. Additional Information:

Have you been convicted of a crime related to the abuse or misuse of animals? \Box Yes \Box No Do you have a valid driver's license? \Box Yes \Box No Are you 18 years of age or older? \Box Yes \Box No List the number of accidents/violations you have received in the last 3 years: ______ Are you a United States citizen or have a right to work in the United States? \Box Yes \Box No

6.	References:
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Name	Phone
How are you associated?	
Name	Phone
How are you associated?	

READ CAREFULLY: I certify that the information contained in this application is correct to the best of my knowledge and understand that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I understand nothing in this form can be construed as an employment contract and my employment, if hired, will be 'at will' and may be terminated by either myself or Happy Trails Farms Animal Sanctuary, Inc. at any time, with or without cause, and without notice, unless modified in a written agreement by both myself and the Executive Director of Happy Trails Farm Animal Sanctuary, Inc. No representative of Happy Trails Farm Animal Sanctuary, Inc. has the authority to make any agreement for a specified period of time or to make any other agreement contrary to the foregoing.

Signature_