Notorious D.O.G.

8625 Main Street, Clarence, NY 14221

P: 716-631-2600

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT) Position(s) Applied For: Date of Application: Last Name First Name Middle Name Address Zip Code City State Telephone Number(s) Social Security Number If you are under 18 years of age, can you provide required proof of your Eligibility to work? Yes ____ No Are you currently employed? ____Yes ____ No ____ Yes ___ No May we contact your present employer? Are you prevented from lawfully becoming employed in this country because of Visa or **Immigration Status?** Yes ____ No (proof of citizenship or immigration status will be required upon employment) On what date would you be available for work?

Are you available	to work: Full Time	Part Time	e Days _	Evenings		
Can you travel if a	Yes	No				
Have you been convicted of a felony within the last 7 years? Yes No (Conviction will not necessarily disqualify an applicant from employment)						
If yes, please expla	nin					
EDUCATION						
	Name and Address of School	Course of Study	Years Completed	Diploma Degree		
High School						
Undergraduate College						
Graduate Professional						
Other (Specify)						
Describe any spec	ial training, apprentices	ship, skills and ext	ra-curricular act	tivities:		

EMPLOYMENT EXPERIENCE – start with your most recent job.

Employer	Dates Employed		Work Performed	
Address	From	То		
Telephone No.	Hourly Rate/Salary			
Job Title	Starting	Final		
Supervisor				
Reason for Leaving:				
Employer	Dates Employed		Work Performed	
Address	From	То		
Telephone No.	Hourly Rate/Salary			
Job Title	Starting	Final		
Supervisor				
Reason for Leaving:				
Employer	Dates Employed		Work Performed	
Address	From	То		
Telephone No.	Hourly Rate/Salary			
Job Title	Starting	Final		
Supervisor				
Reason for Leaving:				

^{*}If you need additional space, please continue on a separate sheet of paper.

REFERENCES: Please list 3 References:

all must be a previous non-related and a supervisor/contact that can verify your work abilities

1.	Name:	Phone No
	How many years known:	
2.	Name:	Phone No
	How many years known:	
3.	Name:	Phone No
	How many years known:	

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant	Date

FOR PERSONAL DEPARTMENT USE ONLY				
Date of Interview				
Interviewer	Remarks			
2 nd Interview Yes No	Date of Employment			
Job Title	Hourly Rate/Salary			
Approved by	Title Date			