

## Employment Application for Trails End Pet Sitting

Please complete and send to: **admin@trailsendpetsitting.com** or mail to: **Trails End Pet Sitting, 20542 Poplar Ridge Road, Lexington Park, MD 20653** (click on gray box and begin typing)

Name:

Date of Birth:

Address:

Phone:

Email:

Are you eligible to work in the U.S.?  Yes  No

Have you ever been convicted of a felony?  Yes  No. If yes, please explain.

Do you have a reliable, insured car?

Part time Days/Hours Available:

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

Are you willing to do overnights and/or housesitting services?  Yes  No

Why are you interested in employment with our company?

What is your educational background?

Describe your experience with pets:

Do you have any pets? If so, tell me about them.

Can you handle walking two dogs at a time?

Can you handle a dog up to 100 pounds?

Are you able to give a pill to a cat?

Can you administer an insulin injection?

Is there any pet you would prefer not to care for?

Employment history: (please list your most current employment first)

1. Date of employment: From \_\_\_\_\_ To \_\_\_\_\_  
Name of employer: \_\_\_\_\_ Supervisor/manager name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Duties \_\_\_\_\_  
Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Reasons for leaving: (if any) \_\_\_\_\_  
May we contact your supervisor?  Yes  No

2. Date of employment: From \_\_\_\_\_ To \_\_\_\_\_  
Name of employer: \_\_\_\_\_ Supervisor/Manager name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Duties \_\_\_\_\_  
Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Reasons for leaving: (if any) \_\_\_\_\_  
May we contact your supervisor?  Yes  No

3. Date of employment: From \_\_\_\_\_ To \_\_\_\_\_  
Name of employer: \_\_\_\_\_ Supervisor/manager name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Duties \_\_\_\_\_  
Beginning Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Reasons for leaving: (if any) \_\_\_\_\_  
May we contact your supervisor?  Yes  No

List three personal references, not related to you, whom you have known for at least one year:

Name:	Phone:	Relationship
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I verify that the information provided above and on the previous pages is accurate and true to the best of my knowledge.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

If completing electronically, typed name will be regarded as signature.