PUPS PLAYHOUSE EMPLOYMENT APPLICATION

PUPS PLAYHOUSE LLC will provide equal employment opportunities to all applicants without regard to an applicant's race, color, religion, sex, gender, sexual orientation, genetic information, national origin, age, veteran status, uniformed service member status, physical or mental disability, or any other category protected by applicable federal, state or local laws. PUPS PLAYHOUSE will provide reasonable accommodations to allow an applicant to participate in the hiring process (e.g., accommodation for a test or job interview) if requested. Applications are maintained for 6 months. If you wish to be reconsidered after 6 months, you must re-apply.

*Indicates required field

		Applicant l	Information	
*Full Name:				
	Last		First	М.І.
*Address:	Street Address			Apartment/Unit #
	Street Address			Apurtment, omt #
	City		State	ZIP Code
*Phone Number:	()		Social Security Num	nber:
*Email Address:				
Position Applied for:	_		Source of Referra	l:
		Select Accu	rate Answer	
*Are you at least 18 y	ears?	□ Yes	□ No (If No. se	chool district is required to complete form)
•				cation%20for%20Work%20Permit.pdf
Can you stand/walk fo		☐ Yes	□ No	
Can you lift 40 pounds	s?	☐ Yes	□ No	
*Are you authorized t	o work in the U.S.?	☐ Yes	□ No	
*Have you been convi	cted of any crime?	☐ Yes	\square No (If yes, v	vill not necessarily disqualify you)
	Availability	y to Work – For	Daycare Associate	Positions
· ·				e AVAILABLE to work. Then denote 10AM", "Not Available", etc.)
☐Monday from 6:45a	m to 7:30pm			
☐Tuesday from 6:45a	nm to 7:30pm			
☐Wednesday from 6:	45 to 7:30pm			
☐Thursday from 6:45	am to 7:30pm			
☐Friday from 6:45am	to 7:30pm			
☐Saturday from 8:45	am to 6:00pm			
☐Sunday from 9:45 a	m to 5:00pm			

Work History

Please list the names of your present and/or previous employers in chronological order with present or most recent employer listed first. Attach additional sheets if needed. You may include any verifiable work performed on a self-employed basis, volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment. Do not answer "See *Résumé*."

Employer Information: Company Name:	1.	
Address: Type of Business: Employed From: To: Manager/Supervisor: Phone Number: May We Contact This Person: Yes	Employer Information:	
Type of Business: Employed From: Manager/Supervisor: Phone Number: May We Contact This Person: Yes	Company Name:	
Employed From:	Address:	
Employed From:	Type of Business:	
Phone Number: May We Contact This Person: Yes	Employed From:To:	
May We Contact This Person: Yes	Manager/Supervisor:	
Reason for Leaving: Describe Duties: 2. Employer Information: Company Name: Address: Type of Business: Employed From: To: Manager/Supervisor: Phone Number: May We Contact This Person: No Reason for Leaving:	Phone Number:	
Z. Employer Information: Company Name:	May We Contact This Person: ☐Yes ☐No	
2. Employer Information: Company Name: Address: Type of Business: Employed From: Manager/Supervisor: Phone Number: May We Contact This Person: No Reason for Leaving:	Reason for Leaving:	
Employer Information: Company Name:	Describe Duties:	
Employer Information: Company Name:		
Employer Information: Company Name:		
Employer Information: Company Name:		
Company Name:	2.	
Address: Type of Business: Employed From:To: Manager/Supervisor: Phone Number: May We Contact This Person: □Yes □No Reason for Leaving:	Employer Information:	
Type of Business: Employed From: To: Manager/Supervisor: Phone Number: May We Contact This Person: No Reason for Leaving:	Company Name:	
Type of Business: Employed From: To: Manager/Supervisor: Phone Number: May We Contact This Person: No Reason for Leaving:	Address:	
Employed From:To:		
Phone Number: May We Contact This Person: No Reason for Leaving:		
May We Contact This Person: ☐Yes ☐No Reason for Leaving:	Manager/Supervisor:	
Reason for Leaving:	Phone Number:	
	May We Contact This Person: ☐Yes ☐No	
Describe Duties:	Reason for Leaving:	

Education and Military Experience

Please give accurate, complete educational history, starting with the present/most recent. If applicable, below list any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc.

Education	School Name and Location	Course of Study or	Graduate?	# of Years	Honors
Laucation	(Address, City, State)	Major	Yes or No	Completed	Received
High School				-	
College					
Graduate/Professional					
Graduate/Froressional					
Trade or Correspondence					
Were you in the Military? If so, did you receive an h	□Yes □No onorable discharge? □ Yes □	No			
	A d district	-1 I - f - · · · · · · ·			
	Addition	al Information			
Are you able to make at le	east a 9-month commitment to PL	JPS PLAYHOUSE?	□Yes □No	1	
(Answering NO will not di	squalify you)				
Do you currently (or previously) have a dog?			□Yes □No		
Do you have any special training or education with animals? If so, describe:			□Yes □No		
*Please specify why you v	would be a good fit for PUPS PLAY	HOUSE?			

Additional Information (Continued)

Please	specify any custor	mer service skills:					
Is ther	e anything else tha	at you would like us to know about	t you?				
		R	eferences				
*Dloos	a list the names of	at least two references we may con		a prior work ove	orionco may	list school or	
	e list the hames of eer-related referer	·	itact. iliulviduais with i	io prior work exp	erierice may	1151 5011001 01	
	Name	Position	Company	Work	Phone	Email	
				Relationship	Number		
	Lauthautaa DUDG	DIAVILOUEE to investigate movement		- ! f .!		•-	
1.		SPLAYHOUSE to investigate my recolication except where my written	= -				
	employment app	Silication except where my written	statement specifically	requests that no	investigation	i be illade.	
2. I understand that nothing contained in this employment application, or in any oral representations made to me							
during the interview process, may create an employment contract between PUPS PLAYHOUSE and me.							
_							
3.	3. PUPS PLAYHOUSE, LLC IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT						
	REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.						
		,,,,	,				
4.	4. I hereby attest under penalty of perjury that I am authorized to work in the United States.						
5.	By signing this application, I affirm that the information given by me in this employment application is accurate and complete; I understand that any falsification will be considered grounds for dismissal.						
	complete; I unde	erstand that any faisification will b	e considered grounds t	or dismissal.			
Applica	ant's Signature			Date			