



**THE HUMANE SOCIETY
OF · TAMPA · BAY**
Employment Application

Applicant Data:

Position Applied for: _____ Date: _____

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell/Other: _____ Email Address: _____

Date Available: _____ Social Security #: _____ Salary Requirement: _____

If you are under 18 and we require a work permit, can you furnish one? Yes No

Have you ever worked for this company? Yes No If yes, when? _____

Are you a citizen of the United States? Yes No

If not, are you legally allowed to work in the United States Yes No

Type of employment desired: Full-time Part-time Temporary Seasonal

Have you ever pled "guilty," "no contest," or been convicted of a crime? Yes No

If yes, please give the dates and details: _____

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.

Driver's license number: _____ State: _____

Who referred you to us? _____

Have you ever volunteered for our organization? Yes No

Education:

High School: _____ # of years attended: _____

Did you graduate: Yes No Major: _____ GPA _____

College/University: _____ # of years attended: _____

Did you graduate: Yes No Major: _____ GPA _____

Other: _____ # of years attended: _____

Did you graduate: Yes No Major: _____ GPA _____

References:

Please furnish names, addresses and telephone numbers of two people who you are not related to and who you have not worked for:

Name: _____ Address: _____

City: _____ Phone #: _____

Name: _____ Address: _____

City: _____ Phone #: _____

Summarize your skills or qualifications for this position: _____

Previous Employment (begin with most recent position):

Dates of Employment: From _____ to _____ Position: _____

Firm: _____ Address: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary & Title: _____ Ending Salary & Title: _____

Reason for Leaving: _____

May we contact this employer for a reference: Yes No

Dates of Employment: From _____ to _____ Position: _____

Firm: _____ Address: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary & Title: _____ Ending Salary & Title: _____

Reason for Leaving: _____

May we contact this employer for a reference: Yes No

Dates of Employment: From _____ to _____ Position: _____

Firm: _____ Address: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary & Title: _____ Ending Salary & Title: _____

Reason for Leaving: _____

May we contact this employer for a reference: Yes No

Please respond to the following questions and comments as thoroughly as possible:

1. Unfortunately, due to the pet overpopulation problem, the saddest responsibility with which the Humane Society of Tampa Bay is faced is the tragedy of having to euthanize (put to sleep) unwanted animals. You must be aware of this, and some job classifications are trained to participate. Explain your feelings and attitudes on this subject:

2. You will be working directly with the public on many emotional and controversial subjects as a representative of the Humane Society of Tampa Bay. Have you had previous experience with the public? Explain.

3. Continuous cleaning and disinfecting of the kennels, cattery, shelter and office is necessary daily to ensure the health of the animals and to keep up the appearance of the shelter. Are you willing to accept this as part of your job?

4. Part of our responsibility is educating the public on problems of pet overpopulation and animal welfare. Please state your feelings on the subject.

5. We are a not-for-profit corporation and operate on a limited budget. We insist our staff report to work on time with minimal absenteeism. Would anything prevent you from doing this? If so, please explain.

(Note: The first ninety days of employment are probationary. During this time, the adoption of an animal by you from the Humane Society of Tampa Bay is prohibited unless authorized by the Executive Director.)

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, education, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or persons from all liability when responding to inquires in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ Date: _____

Please either mail to HSTB, 3607 N. Armenia Ave., Tampa, FL 33607, fax to (813) 876-0765
or email to hstb@humanesocietytampa.org