## **Moores Mill Animal Hospital**

# **Employee Application**

Personal Information	
Date: Name:	
Present Address:	
Phone Number: SSN:	
E-Mail Address: Ref	erred by:
Employment Desired:	
Position: Start Date:	Salary desired:
Are you a student? Yes No If so, list available hours:	
Do you have any issues working weekends and holidays? Yes	No
Are you able to work overtime? Yes No	
Besides school, do you have other commitments that will take you	from work: Yes No
If yes, please explain	
Are you currently employed? Yes No If yes, where?	
May we contact your present and previous employers? Yes N	0

#### Past Employment (last four places of employment)

Name	Location and phone number	Position Held	Dates of Employment	Reason for Leaving
			Employment	Leaving

#### Education

	Name	Years attended	Graduation Year	Major
High School				
College				
College				

Are you proficient in any foreign languages? If so, what language? General U.S. Military or Naval Service? Yes No Rank: Division: \_\_\_\_\_ If hired, can you furnish proof of age? Yes No Proof of Citizenship? Yes No Do you use tobacco products? Yes Do you claim the use of tobacco on insurance? Yes No No What are your strengths? What are your weaknesses? What do you hope to gain through your time here? Give an example of how you are a team player.

**References** (please do not list family):

Name	Phone	Relationship to you	Years Known

The Age Discrimination and Employment Act of 1957 prohibits on the basis of age with respect to individuals who are at least 18, but less than 65.

I authorize investigation of all statements contained in this application. I understand that misrepresentation of omission of facts called for is cause for dismissal. Further, understand and agree that my employment is for no definite period, and may regardless of the date of employment or my wages and salary, be terminated at any time without any previous notice.

Signature:	 Date:	



## Rental Property Screening, LLC

(800) 257-0762 (334) 745-2003 Fax (334) 745-2066 http://rentalpropertyscreening.com

### **EMPLOYMENT SCREENING INQUIRY FORM**

	NAME (FIRST)	(MIDDL	E)	(LAST)	
	OTHER NAME(S) USED				
	PRESENT ADDRESS				
5	CITY	STATE	ZIP	TELEPHONE	
ICAL	PREVIOUS ADDRESS				
APPLICANT	CITY	STATE	ZIP	TELEPHONE	
٩	SOCIAL SECURITY NUMBER				
	BIRTH DATE: MONTH	DAY		YEAR	
	DRIVERS LICENSE NUMBER			YEAR	

AUTHORIZATION TO RELEASE CRIMINAL HISTORY INFORMATION REPORTS, PRIVATE COMPANIES' DISHONESTY, DRUG OFFENSE, OR VIOLENCE REPORTS, OR CREDIT BUREAU REPORTS. For and in consideration of my being considered for employment, I hereby authorize the Company designated below ("Employer") to make inquiries to Rental Property Screening, LLC (RPS) a consumer reporting agency, concerning my employment suitability and qualification; including: (i) any public record of any convictions for crimes of violence or dishonesty; (ii) any incidents of employment dishonesty, retail theft, or other employment related acts of dishonesty, violence, or drug related offenses reported to RPS by any merchant or employer where such acts occurred; or (iii) any credit bureau reports. I further authorize any governmental agency where such conviction information is on file, or any company ("Prior Company") where such incident or credit transaction occurred, and RPS to disseminate such report(s) to Employer during any period(s) while I may be employed by Employer. I hereby authorize Employer to make further like inquires to RPS as Employer may, from time to time, deem necessary for employment purposes. I also hereby authorize RPS, any such governmental agency, any such credit bureau, and any such Prior Company to issue such reports in response to Employer's inquiry(ies). I waive any further notice with respect to Employer's inquires or with respect to such governmental agencies, such Prior Companies, such credit bureau, and every such report(s). I hereby generally release and fully discharge RPS, every such governmental agency, every such credit bureau, and every such Prior Company from any against all liability with respect to, or arising from, the release or dissemination of any such information for such purposes. I understand that my employment, promotion, or retention may be determined, in whole or in part, based on the report(s) so issued to employer by RPS. I have been informed and I understand that I may obtain a copy of such report and tha

I certify that the aforementioned applicant has signed and agreed to these conditions on the date listed on this form and can provide a copy of said signed		DATE AUTHORIZED / SIGNATURE
	Agreement upon request.	DATE AOTHORIZED / SIGNATORE

	COMPANY	LOCATION
	INTERVIEWER	RETURN FAX NUMBER
۲Y	SCREENING SERVICES REQUESTED (	PLEASE CHECK):
PAI	RPS SCREENING ONLY	CRIMINAL CONVICTION SEARCHES CREDIT REPORT SOCIAL SECURITY NUMBER VALIDATION
COMPANY		ALABAMA STATEWIDE
		OTHER STATES AND COUNTIES (Please List)
	Company's Certification: Compa that report(s) only for employment	ny hereby certifies to RPS that it is requesting a consumer credit report(s) on the applicant named above and that Company will use purposes.



AUTHORIZATION

Rental Property Screening, LLC 2108 A Gateway Drive Opelika, Alabama 36801

