



Employment Application

Scoopity Doo is an equal opportunity employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, nation origin, marital status, ancestry, citizenship, veteran status, sexual orientation, or disability.

Personal		
Last Name	First	Initial
Address		Social Security #
Date Available To Start Work		Home Telephone #
Position Applied For	Referred By	Work #
Have you ever interviewed with the Company or its affiliates before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list date(s), job title(s) & location(s)	
Have you ever been employed by the Company or its affiliates before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list date(s), job title(s) & location(s)	
Do you have any relatives employed by the Company or its affiliates? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list date(s), job title(s) & location(s)	
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No	If under 18, do you have a work permit?	

Education			
School	Location	# of Years Attended	Major/Degree/Diploma/License or Certificate
High School:			
Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No			
College:			
Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Post Graduate:			
Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Special Training/Other:			
Did you complete? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Skills
List Computer Skills (Hardware/Software):
List Any Professional Designations:
Other Special Knowledge, Skills, or Qualifications:

Employment History			
Starting with the most recent, describe all paid, military, and applicable voluntary work experience. Highlight your knowledge, skills, and abilities which best demonstrate your qualifications for this position.			
Employer Name:	Employer Address:	Date Employed From:	Date Employed To:
Supervisor Name:	Employer Phone Number:	Starting Salary:	Ending Salary:
Job Title:	Reason for Leaving:		
Duties and Responsibilities:			

Employer Name:	Employer Address:	Date Employed From:	Date Employed To:
Supervisor Name:	Employer Phone Number:	Starting Salary:	Ending Salary:
Job Title:	Reason for Leaving:		
Duties and Responsibilities:			

Employer Name:	Employer Address:	Date Employed From:	Date Employed To:
Supervisor Name:	Employer Phone Number:	Starting Salary:	Ending Salary:
Job Title:	Reason for Leaving:		
Duties and Responsibilities:			

Employer Name:	Employer Address:	Date Employed From:	Date Employed To:
Supervisor Name:	Employer Phone Number:	Starting Salary:	Ending Salary:
Job Title:	Reason for Leaving:		
Duties and Responsibilities:			

General

1. May we contact your current employer for references? ☐ YES ☐ NO
2. Are you willing to travel if the position requires it? ☐ YES ☐ NO
3. Are you legally eligible for employment in the U.S.? ☐ YES ☐ NO
4. Have you ever been convicted of a crime which has not been annulled, expunged or sealed by court? (A yes response does not automatically disqualify your application.) ☐ YES ☐ NO
If yes, list all and explain:

References

Please list three professional references who know your qualifications and indicate relationship:

Name	Telephone Number	Relationship

Certification and Authorization

I hereby certify that all information furnished in this application is true and complete. I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

I hereby authorize Scoopity Doo to contact, obtain, and verify the accuracy of information contained in this application from previous employers, educational institutions, and references. I also hereby release from liability, Scoopity Doo and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I hereby acknowledge that I have read and agree to the above statements.

Applicant Signature: _____

Date: _____