



KANSAS HUMANE SOCIETY

Employment Application

3313 N. Hillside Wichita, KS 67219 - 316.524.9196 - www.kshumane.org

Our Vision

To create a humane community for all companion animals.

Our Mission

The Kansas Humane Society is a community resource for pets and people, dedicated to enhancing the welfare of all companion animals.

About Us

The Kansas Humane Society is a private, not-for-profit, 501(c)(3) organization that receives over 15,000 animals each year from citizens unable or unwilling to care for them.

Date _____ Are you 18 years of age or older? Yes No

Name _____ E-mail _____

Current Address _____ City/State/Zip _____

Previous Address _____ City/State/Zip _____

Daytime Phone _____ Alternate Phone _____

What position are you applying for? _____

What responsibilities or tasks do you expect to perform for this job? _____

Hourly Wage/Salary Desired _____ Date Available _____

Seeking Full Time Employment Part Time Employment Either

Are you available to work weekends or holidays? Yes No

How did you hear about this position? _____

WORK EXPERIENCE

List your previous experience beginning with your most recent position.

Company _____ May we contact this employer? Yes No

Address/City/State _____

Phone _____ Supervisor's Name _____

Dates Employed - Beginning _____ Ending _____

Starting Job Title _____ Ending Job Title _____

Duties _____

Reason for Leaving _____

Company _____ May we contact this employer? Yes No

Address/City/State _____

Phone _____ Supervisor's Name _____

Dates Employed - Beginning _____ Ending _____

Starting Job Title _____ Ending Job Title _____

Duties _____

Reason for Leaving _____

Company _____ May we contact this employer? Yes No

Address/City/State _____

Phone _____ Supervisor's Name _____

Dates Employed - Beginning _____ Ending _____

Starting Job Title _____ Ending Job Title _____

Duties _____

Reason for Leaving _____

EDUCATION

High School Name _____ City/State _____

Years Completed | 1 2 3 4

College/University Name _____ City/State _____

Years Completed | 1 2 3 4 Graduation Date _____ Major _____

Additional School/Training Name _____ City/State _____

Years Completed | 1 2 3 4 Graduation Date _____ Major _____

TRAINING AND SKILLS

Please mark if you have professional experience in the following areas and explain below:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Animal Handling | <input type="checkbox"/> Animal Behavior | <input type="checkbox"/> Animal Welfare |
| <input type="checkbox"/> Office Skills | <input type="checkbox"/> Kennel Cleaning | <input type="checkbox"/> Vet Technician | <input type="checkbox"/> Animal Grooming |

Customer Service Skills _____

Office Skills _____

Professional Animal Care Training/Experience _____

Have you worked professionally with domestic animals before? Yes No

If yes, which ones? Dogs Cats Rodents Birds Other _____

Can you perform the essential functions of the job applied for with/without reasonable accomendations? Yes No

INQUIRY

Why do you want to work for the Kansas Humane Society? _____

What are your thoughts about euthanasia? _____

CONVICTION RECORD

Have you ever been convicted of crime other than a minor traffic offense? Yes, please explain No _____

An affirmative response will not necessarily disqualify you from employment.

PROFESSIONAL REFERENCES

List the names, addresses and phone numbers of three professional references who are not related to you.

1. _____
2. _____
3. _____

PERMISSION TO WORK

Are you legally authorized to work in the United States? Yes No

APPLICANT'S STATEMENT

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying information. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event I am hired.

I hereby agree to submit to any lawful drug, integrity, or skills testing that may be required as a condition of employment or continued employment and understand that unless otherwise prohibited by law, refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge. I further agree to submit to search of my person or of any locker or work area that may be assigned to me, and I hereby waive all claims for damages on account of such examination.

I understand that this application is valid for 6 months; I will reapply after that time if I am still interested in employment. I also understand that my employment is terminable-at-will, and that this application is not, and is not intended to be, a contract for continued employment.

SIGNATURE _____ DATE _____

FOR KHS STAFF USE ONLY

First Interview Date _____ Second Interview Date _____ Reference Check _____

Notes