



465 Gundersen Drive
Carol Stream, IL
630-668-1748

EMPLOYMENT APPLICATION

PERSONAL DETAILS:

Full Name:

Today's Date:

Email Address:

Phone Number:

Preferred Method of Contact: Phone/Text Email

Home Address:

City:

State:

Zip:

Are you at least 16 year of age? YES | NO

If no, do you have a work permit or are you able to obtain one? YES | NO

Are you able to perform the essential job functions of the position you are applying for with or without reasonable accommodations? YES | NO

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by court? A yes response does not automatically disqualify your application. YES | NO

ENTRY LEVEL POSITIONS:

Position Applied For:

- Boarding Care Team Member
- Client Service Representative
- Veterinary Assistant

LICENSES REQUIRED POSITIONS:

Positions Requiring Illinois State License:

- Certified Veteriinary Techniciain
- Associate Veterinarian

Are you licensed in Illinois: YES

Available Start Date:

Full Time Part Time

Days & Hours Available:

EMPLOYMENT HISTORY:

For CVT/DVM: Please attach resume and skip this section

Employer Name:

Job Title:

Dates of Employment:

From:

To:

Responsibilities & Achievements:

EMPLOYMENT APPLICATION

ADDITIONAL INFORMATION:

How did you hear about this job?
(e.g., Referral, Online Job Board, Company Website, etc.)

Do you have any friends or family that work or have worked for Knoll Animal Hospital?

REFERENCES:

Please provide two professional or personal references who are familiar with your work.

Reference 1:

Name:

Relationship to Applicant:

Phone Number:

Email:

Reference 2:

Name:

Relationship to Applicant:

Phone Number:

Email:

APPLICANT'S DECLARATION

By submitting this application, I confirm that the information provided is accurate and complete to the best of my knowledge. I understand that any false information may disqualify me from consideration for employment.

Print Name:

Date:

Applicant Signature:
