



## Employment Application

### Applicant Information

First: \_\_\_\_\_ Last: \_\_\_\_\_ M.I.: \_\_\_\_\_ Date: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

Available Start Date: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

How were you referred to us? ☐ Job Fair ☐ Online ☐ Staff ☐ Other: \_\_\_\_\_

Are you authorized to work in the U.S.? ☐ Yes ☐ No

Have you previously worked for us? (Volunteer, employment, etc.) ☐ Yes ☐ No

### Education

High School: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Did you graduate? ☐ Yes ☐ No Degree: \_\_\_\_\_

College: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Did you graduate? ☐ Yes ☐ No Degree: \_\_\_\_\_

### Military Service

Branch of Service: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

### Disclaimer and Signature

The Saginaw Children's Zoo is an equal opportunity employer and does not discriminate based on race, religion, national origin, sex, age, handicap, marital status, color, height, weight, status as a disabled veteran, or any other legally protected classification. Information provided on this application will not be used for any discriminatory purpose.

I acknowledge that consideration for employment may be contingent on the results of a reference and background check. In addition, I consent for all contacts to provide information concerning this application. I release contacts from liability for providing information to the Zoo. If an offer of employment is made, a medical examination may be required prior to beginning duties.

I hereby certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this application in any detail is grounds for disqualification or for dismissal from employment. I further acknowledge that the terms of my employment can be terminated with or without cause and with or without notice, at any time, at the option of either the employer or myself unless my employment is subject to the terms of a collective bargaining agreement.

Your application form will be maintained in our active files for sixty (60) days from the date of application. Incomplete applications will not be considered for employment.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Previous Employment**

- Please complete this page if you do not have a resume.
- Starting with most recent, please list all previous employers.

Company: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary/Hourly Rate: \$ \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

---

Company: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary/Hourly Rate: \$ \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

---

Company: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary/Hourly Rate: \$ \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

**References**

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

---

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

---

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_