



**The Healing Species, Inc.**  
**APPLICATION FOR EMPLOYMENT**  
**Non-exempt Position**

Date: \_\_\_\_\_ Position Desired: \_\_\_\_\_

Name (Last, First, Middle): \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: ( ) _____ - _____ (Home)	Social Security Number:
( ) _____ - _____ (Other)	

Are you 18 years old or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you either a U.S. citizen or an alien authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Have you ever worked or attended school under another name? If, so under what name(s)? \_\_\_\_\_

Have you ever been convicted of a crime?  Yes\*  No

If yes, give details, including date(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*A yes answer will not automatically disqualify you from employment. We will consider the nature and date of the offense and the job for which you are applying for job-related purposes only, and only to the extent permitted by applicable law.

**POSITION DESIRED**

Position:	Date you can start:	Hourly Salary Desired:
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Do you prefer?: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time If part-time, hours per week desired: _____	Are you available to work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you available to work Holidays? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Have you received a description of the job or been made aware of the essential functions of the job you are applying for? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you understand the job requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Days and hours you are available to work:

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
AM							
PM							

Have you previously worked for The Healing Species, Inc.?  Yes  No

If so, from (Starting Date) \_\_\_\_/\_\_\_\_/\_\_\_\_ to (Ending Date) \_\_\_\_/\_\_\_\_/\_\_\_\_

Former supervisor(s): \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT** but merely is intended to provide information necessary to evaluate suitability for employment. It is the policy of The Healing Species, Inc. to provide equal employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, disability, veteran status, ethnicity, or any other status protected under state or federal law. It is also the policy of The Healing Species, Inc. to have the option of conducting pre-employment screening before a job offer is made. If a job offer is made, employment may be contingent upon a favorable background screening. This application must be filled out completely to be considered for employment. Resumes are not considered official applications.

## EDUCATION

High School (Name & Location)	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Technical School (Name & Location)	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
College/University (Name & Location)	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Other education or training:		
Other special skills:		
Licenses or certifications:		

## MILITARY EXPERIENCE

Branch of Service:	Dates Served:	Rank at Discharge/Separation:
Education and Training:		

## WORK EXPERIENCE

Please list all previous employment for the past 10 years, beginning with the most recent. Use additional sheets of paper as necessary.

Employer:	Address:		
From (Month/Year):      To (Month/Year):	Position Held:	Reason for leaving:	
Supervisor's Name & Title			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Starting Pay (Hourly):		Final Pay (Hourly):	

Employer:	Address:		
From (Month/Year):      To (Month/Year):	Position Held:	Reason for leaving:	
Supervisor's Name & Title			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Starting Pay (Hourly):		Final Pay (Hourly):	

Employer:	Address:		
From (Month/Year):      To (Month/Year):	Position Held:	Reason for leaving:	
Supervisor's Name & Title			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Starting Pay (Hourly):		Final Pay (Hourly):	

Employer:	Address:		
From (Month/Year):	To (Month/Year):	Position Held:	Reason for leaving:
Supervisor's Name & Title			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Starting Pay (Hourly):		Final Pay (Hourly):	

### DRIVING RECORD

Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Driver's License Number:	Issuing State:
Have you accumulated 4 or more points on your driving record in the past 3 years? (If yes, please explain)	

### REFERENCES

BUSINESS Name	Company/Title	Address	Telephone
PERSONAL Name	Years Known	Address	Telephone

### IMPORTANT INFORMATION NEEDED

The following documents **MUST** be provided prior to employment with The Healing Species, Inc.

1. Application for Employment
2. Credentials (i.e. Degrees, Diplomas, Certifications, Licenses, etc.)
3. Copy of Driver's License/Legal I.D.
4. Copy of Social Security Card
5. Dispositions clearing criminal charges if requested

Failure to provide these documents will prohibit your employment with The Healing Species, Inc.

## AUTHORIZATION AND ACKNOWLEDGMENTS

It is very important that you read this section carefully and that you fully understand it before you sign it. If you have any questions about this application or this section, please ask before you sign this application.

*In exchange for The Healing Species, Inc.'s consideration of this employment application:*

1. I certify that all information I have supplied in this application and any other information, oral or written, is true, complete and accurate. I understand that any misstated, misleading, incomplete, or false information is grounds for rejection of this application, refusal to hire, withdrawal of an employment offer, or immediate discharge whenever and however discovered.
2. I hereby authorize The Healing Species, Inc., its agents, successors or assigns, to contact my previous employers to request references. Further, I agree to hold The Healing Species, Inc., and such previous employers harmless for disclosure and authorize them to release any and all information pertaining to me and my employment.

*I fully understand and acknowledge, and where applicable, consent to the following:*

- My employment is at will. I may terminate my employment at any time for any reason;
- I may be discharged for any reason, without notice;
- I am subject to a 90-day introductory period;
- Successful completion of my introductory period does not change The Healing Species, Inc.'s at will employment relationship;
- The Healing Species, Inc. will conduct a criminal background check, driver's license check, and will check my references;
- The Healing Species, Inc. will rerun background screening as needed to meet regulatory and contractual requirements throughout my employment;
- Work schedules may vary and can be unpredictable, and as such, I may be required to work different shifts, weekends, or overtime;
- I will be required to comply with the policies and protocols set forth in The Healing Species, Inc. Policy & Procedure Manual as it currently exists, and as amended from time to time, as well as any other existing and future company policies, rules and regulations;
- The Healing Species, Inc. reserves the right to amend, change and/or modify the policies and protocols set forth in its Policy & Procedure Manual at any time;
- I will represent The Healing Species, Inc. in a professional, appropriate manner at all times.

*I have read and fully understand everything in this application.*

Applicant's Printed Name:	Applicant's Signature:	Date: