

**MAINE STATE SOCIETY FOR THE PROTECTION OF ANIMALS
EMPLOYMENT APPLICATION**

The Maine State Society for the Protection of Animals is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, sexual orientation, marital status, national origin, disability or handicap, or veteran status.

PERSONAL:

Name _____ Date _____

Address _____

Number & Street City State Zip Code
Date Available _____ Phone # _____ Cell Phone # _____

Social Security Number _____ Are you over 18 years old? Yes No If no, how old are you? _
____ (If no, you may be required to provide authorization to work.)

Are you legally eligible for employment in the United States? Yes No
(If offered employment, you will be required to provide documentation to verify eligibility.)

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? _____ Yes No

If employed, will you have reliable transportation to and from work? . Yes No

RECORD OF CONVICTION:

Have you been convicted of a crime other than minor traffic offense in the past 10 years?
 Yes No If yes, please explain:

(A conviction won't necessarily automatically disqualify you for employment. Factors like age, date of conviction, seriousness and nature of the crime, and rehabilitation will be considered).

All applicants who are offered employment with the MSSPA will be subject to criminal background checks. Employment is conditioned on the results of the background checks.

EMPLOYMENT: List last employer first.

May we contact your present employer? Yes No

1. _____
Name Address Telephone #

Position _____ Dates of Employment: From _____ To _____
Mo/Yr Mo/Yr

Duties _____ FT PT No. of Hrs. _____

Reason for Leaving _____

2. _____
 Name Address Telephone #
 Position _____ Dates of Employment: From _____ To _____
 Mo/Yr Mo/Yr
 Duties _____ FT __ PT __ No. of Hrs.____
 Reason for Leaving _____

3. _____
 Name Address Telephone #
 Position _____ Dates of Employment: From _____ To _____
 Mo/Yr Mo/Yr
 Duties _____ FT __ PT __ No. of Hrs.____
 Reason for Leaving _____

If you wish to describe additional work experience, provide the above information for each position on a separate piece of paper.

Have you ever been discharged or asked to resign from a job? ____ Yes ____ No

If yes, explain: _____

THREE REFERENCES:

_____	_____	_____
Name	Relationship	Tel. No.
_____	_____	_____
Name	Relationship	Tel. No.
_____	_____	_____
Name	Relationship	Tel. No.

BRIEFLY DESCRIBE WHY YOU WOULD LIKE TO WORK FOR THE SOCIETY:

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the facts set forth in this employment application are true and complete to the best of my knowledge. I authorize the MSSPA to check their accuracy, to obtain reference information on my work performance, and to contact the references listed above. I release the MSSPA from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that if I provide false statements or make omissions on this application I will not be hired, and if I am employed, such false statements or omissions will be grounds for dismissal.

If I am offered a job with the MSSPA I will follow its policies, rules and regulations. I understand that any employment offered is for an indefinite time and at will and that either I or the MSSPA may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____ Date: _____