We appreciate your taking the time to fill out this application. It is important that all questions be answered completely and accurately. Resumes will be accepted as additional information but not in place of a completed application. Please be sure to sign the application when it is completed. **WAGD Richardson TX LLC dba What a Great Dog! IS AN EQUAL OPPORTUNITY EMPLOYER.** It is our policy to abide by all Federal, State and local laws which prohibit discrimination against qualified applicants on account of race, color, creed, national origin, religion, age, sex, marital status, disability, sexual orientation, or any other protected classification prohibited by Federal, State or local law, if otherwise qualified.

**PERSONAL INFORMATION (Please print clearly in black ink or type.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security No: \_\_\_\_\_\_ \_\_\_-\_\_\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_

 Last First Middle

###### Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City State Zip Code Phone

Permanent Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip Code Phone

Type of Position Desired:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date Available For Work:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can you *after employment* submit proof of U.S. citizenship or verification documents of your legal right to work in the United States? ☐ Yes ☐ No

Are you 16 or older? ☐ Yes ☐ No If No, list age:\_\_\_\_\_\_\_\_\_\_\_\_\_ If applicable, are you of legal age to serve alcohol (18 years or older)? ☐ Yes ☐ No

Are you available for full time work? ☐ Yes ☐ No Are you willing to work flexible hours, which could include weekends and/or overtime? ☐ Yes ☐ No

Indicate the shifts you are available to work by marking an “X” in the boxes below.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| Early(Open - 2) |  |  |  |  |  |  |  |
| Late(2 - Close) |  |  |  |  |  |  |  |

What is your salary requirement? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Were you previously employed by What a Great Dog!? ☐ Yes ☐ No If Yes, Date(s)?\_\_\_\_\_\_\_\_\_\_Location?\_\_\_\_\_\_\_\_\_\_\_\_Position?\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any relatives working for What a Great Dog!? ☐ Yes ☐ No If Yes, list names, relationships, and place employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you plan to engage in other work while in our employ? ☐ Yes ☐ No If Yes, please list place of employment and describe the work as well as

The hours:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been convicted of a felony, pled guilty or no contest to a felony, been placed on probation for a felony offense or received deferred adjudication (Conviction will not necessarily disqualify an applicant for employment)? ☐ Yes ☐ No If Yes, explain:\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there any reason you cannot perform the essential functions of the position/ positions for which you are applying? ☐ Yes ☐ No If Yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EDUCATION \_**

**HIGH SCHOOL / G.E.D.**

School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date Completed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Graduated? ☐ Yes ☐ No

Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Type of Diploma/Degree:\_\_\_\_\_\_\_\_\_\_ Major Field of Study:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### COLLEGE / UNIVERSITY / TECHNICAL / VOCATIONAL

School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No. of Semester Hours Completed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Graduated? ☐ Yes ☐ No

Location:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Type of Diploma/Degree:\_\_\_\_\_\_\_\_\_\_ Major Field of Study:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Licenses / Registrations (Indicate Types and Dates Received):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any special skills or knowledge you possess that is related to the job for which you are applying. (Please do not list those items which are related to race, color, creed, national origin, religion, age, sex, marital status, disability, sexual orientation, or non-job related medical conditions):\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMPLOYMENT INFORMATION / HISTORY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please provide your complete work history for the preceding three employers with the most recent first. Include military service, if applicable. We encourage you to attach a resume, but it may not take the place of information on this application.

**EMPLOYER 1:** Type of Business:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Business Phone No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_ Immediate Supervisor’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_May we contact? ☐ Yes ☐ No

Starting Date:\_\_\_\_\_\_\_\_\_\_\_\_\_ Leaving Date:\_\_\_\_\_\_\_\_\_\_\_ Starting Base Salary:\_\_\_\_\_\_\_\_\_\_ Ending Base Salary:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Starting Position Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Present or Last Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_☐ Full Time ☐ Part Time ☐ Seasonal

Briefly Describe Your Duties and Responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMPLOYER 2:** Type of Business:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Business Phone No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_ Immediate Supervisor’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_May we contact? ☐ Yes ☐ No

Starting Date:\_\_\_\_\_\_\_\_\_\_\_\_\_ Leaving Date:\_\_\_\_\_\_\_\_\_\_\_ Starting Base Salary:\_\_\_\_\_\_\_\_\_\_ Ending Base Salary:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Starting Position Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Present or Last Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_☐ Full Time ☐ Part Time ☐ Seasonal

Briefly Describe Your Duties and Responsibilities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMPLOYER 3:** Type of Business:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Business Phone No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_ Immediate Supervisor’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_May we contact? ☐ Yes ☐ No

Starting Date:\_\_\_\_\_\_\_\_\_\_\_\_\_ Leaving Date:\_\_\_\_\_\_\_\_\_\_\_ Starting Base Salary:\_\_\_\_\_\_\_\_\_\_ Ending Base Salary:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Starting Position Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Present or Last Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_☐ Full Time ☐ Part Time ☐ Seasonal

Briefly Describe Your Duties and Responsibilities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Have you ever been fired?** ☐ Yes ☐ No If Yes, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW**

**If you have any questions regarding the following statements, please ask for assistance.**

 I declare that I am qualified to perform all the duties of the position I am seeking. I also declare that the information I have provided on this application is true and correct and that any false statements or omissions will justify my rejection or dismissal. I authorize What a Great Dog! to (1) contact any of my previous employers as well as any reference source to verify the facts and information that I have furnished regarding my qualifications and my character; (2) obtain information from law enforcement and other governmental agencies, military authorities, and private companies concerning my conduct, including traffic and criminal convictions; (3) obtain information from educational institutions concerning my educational record, conduct, and skills; and (4) obtain information concerning my credit history from credit reporting agencies, financial institutions, and other sources.

 I authorize any person(s) having knowledge to provide such information to What a Great Dog!, and release from liability and agree to hold harmless any person that furnishes such information in good faith. If I am employed, I agree to abide by rules, procedures, and policies as modified from time to time, including any drug-free workplace policies.

 If employed by What a Great Dog!, I understand that I will be an employee at will and that my employment with What a Great Dog! may be terminated at anytime by What a Great Dog! or myself for any reason whatsoever. I understand that no supervisor or manager may alter or amend the above conditions. Only a General Manager of What a Great Dog! has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.

 If I am employed, I understand that I will be asked to sign a Federal I-9 form and to provide positive proof of my identity and verification of my right to live and work in the United States. Finally, I understand that this is only an application for employment and neither an offer of nor contract of employment and no part of this application shall be construed as an offer of employment or an employment contract.

**Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**