

# COUNTRY CLUB ANIMAL CLINIC INTERN APPLICATION

DATE \_\_\_\_\_

**APPLICANT INFORMATION:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

**REASON FOR INTERNSHIP:**

Need hours for CVT/RVT program \_\_\_\_\_ Which Program \_\_\_\_\_ Pre Vet \_\_\_\_\_ Interested in the field \_\_\_\_\_

Other (Explain): \_\_\_\_\_

**EDUCATIONAL BACKGROUND:**

High School \_\_\_\_\_ Graduated: ( ) Yes ( ) No ( ) GED

College \_\_\_\_\_ Graduated: ( ) Yes ( ) No ( ) Enrolled

**WORK HISTORY:** (Begin with most recent)

Employer: \_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Duties: \_\_\_\_\_ Salary \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_ Hrs/Wk \_\_\_\_\_

Employer: \_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Duties: \_\_\_\_\_ Salary \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_ Hrs/Wk \_\_\_\_\_

Employer: \_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Duties: \_\_\_\_\_ Salary \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_ Hrs/Wk \_\_\_\_\_

**SKILLS / CERTIFICATIONS:** Please list any applicable skills that you believe make you a valuable asset to the position for which you are applying.

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

**REFERENCES:** Full Name Home or Business Address Phone Number Occupation/Title

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

# INTERN APPLICATION QUESTIONNAIRE

**HAVE YOU EVER WORKED FOR A VETERINARIAN BEFORE?** ( ) YES ( ) NO

**DO YOU ENJOY INTERACTING WITH THE PUBLIC?** ( ) YES ( ) NO

**DO YOU HAVE YOUR OWN PERSONAL VEHICLE?** ( ) YES ( ) NO

**HAVE YOU EVER BEEN DISCHARGED BY AN EMPLOYER?**

If so, give: Employer \_\_\_\_\_  
Address \_\_\_\_\_  
Reason for Discharge \_\_\_\_\_

**DO YOU OWN ANY PETS?**

Please List: 1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_  
4. \_\_\_\_\_  
5. \_\_\_\_\_

**WOULD YOU HAVE ANY DIFFICULTY LIFTING A 35-POUND DOG INTO A CAGE FOUR FEET OFF THE FLOOR?** ( ) YES ( ) NO

**WHY DO YOU WANT TO VOLUNTEER AT COUNTRY CLUB ANIMAL CLINIC?**

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

**WHY SHOULD YOU BE SELECTED FOR THE NEXT AVAILABLE OPEN POSITION?**

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

CERTIFICATION STATEMENT:  
THIS APPLICATION DOES NOT CONSTITUTE A WRITTEN EMPLOYMENT AGREEMENT.

IN THE EVENT THAT THE APPLICANT AGREES TO ACCEPT A POSITION WITH THE COMPANY, THE APPLICANT AGREES THAT THE RELATIONSHIP BETWEEN THE COMPANY AND THE APPLICANT IS AN AT-WILL RELATIONSHIP AND THAT THE INTERNSHIP CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT THE OPTION OF EITHER THE COMPANY OR THE INTERN.

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT. IF THE COMPANY DETERMINES THAT ANY OF THE INFORMATION SUBMITTED IN THIS APPLICATION IS FALSE, I SHALL BE IMMEDIATELY DISQUALIFIED FROM CONSIDERATION FOR INTERNSHIP AND/OR DISCHARGED FROM INTERNSHIP IN ACCORDANCE WITH COMPANY POLICY.

I HEREBY GRANT PERMISSION TO THE COMPANY TO INVESTIGATE THE INFORMATION CONTAINED IN THIS APPLICATION AND RELEASE THE COMPANY AND ANY AGENTS OR OTHER PERSONS ACTING ON BEHALF OF THE COMPANY FROM ANY AND ALL LIABILITY RELATING TO ANY INVESTIGATION OF THE INFORMATION CONTAINED IN THIS APPLICATION.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**