## Leflore County Humane Society

## **Employment Application**

			App	lican	t Inform	ation					
Full Name:						Date:					
	Last		Firs	st			M.I.		·		
Address:											
	Street Address								Apartment/0	Jnit #	
	City						State		ZIP Code		
Phone:					Email_						
Data Avai					Coourity.						
Date Avai			50	ciai	Security	' INO.:					
Position A for:	• •										
Are you a States?	citizen of the Unit	ted	YES	NO	If no,	are you	authorized	to wor	k in the YES U.S.?	NO	
•	ever worked for thus an ever worked for the worked with the worked worked with the worked to be a considerable with the worked for the worked	he Leflore	YES	NO	If yes,	when?_					
Have you felony?	ever been convic	ted of a	YES								
Do you ha	ave any experienc	e with anir	nals? <sub>-</sub>								
	ift. 40 lbs.? (Dog f										
Jan. 7 Jan.	(2 (2		,								
Educatio	n										
High Scho	ool:		A	ddres	ss:						
College_											
	st 3 professional	reference	S.								
Full Name:							Relations Phone:	ship:			
Company: Address:							FIIOHE.				

Full Name: Company: Address:			P	hono	
Full Name: Company: Address:			R	hanai	
tuur 000.	Previou	ıs Employmeı	nt		_
Company: Address:	T TEVIOL				
Job title From:	Responsib	oilities			
May we correference?	ntact your previous supervisor for a	YES	NO		
Company:				Phone:	
Address: Job title	Responsib				
From:	To:	Reason fo	or Leaving	j:	
May we correference?	ntact your previous supervisor for a	YES	NO		
Military Se	rvice				
			From	<u>:</u>	To:
	charge:				
If other than	honorable, explain:				
	Disclaim	er and Signat	ure		
	t my answers are true and complete to that, I understand that false or misleading in				
Signature:				Date:	

\*Email this application to <u>leflorehumanesociety@yahoo.com</u> or mail to LCHS at 1810 Cypress Avenue, Greenwood, MS 38930.