



# DUNN COUNTY HUMANE SOCIETY

Promoting the humane treatment of animals.

## EMPLOYMENT APPLICATION

Fill out this application form completely. If questions are not applicable, enter "NA". **Do not leave questions blank.** Be sure to sign when completed. Resumes will not be accepted in lieu of applications.

Position for which you wish to apply:			
Name		E-Mail Address	
Last		First	Middle
Mailing Address			
Street		City	State Zip
Contact Phone No.			
Do you have any relatives working or volunteering for the Dunn County Humane Society? If so, list names and relationships:			
Have you ever been employed by DCHS? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when? _____			
Have you ever volunteered with DCHS? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when? _____			
Are you at least 16 years of age? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Are you authorized to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Have you ever been convicted of a felony? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If your answer is "Yes," explain in concise detail on a separate sheet of paper, giving the dates and nature of the offense and the outcome of the case(s). A conviction may not disqualify you for this position, but withholding of information will.			
Current Driver's License State and Number			
		State: _____	Number: _____
Date available for work? _____			
Type of employment desired? 15-20 hours per week <input type="checkbox"/> 20-30 hours per week <input type="checkbox"/> 30+ hours per week <input type="checkbox"/>			
Shifts Availability:			
Monday-Friday:		8 a.m.-2 p.m. <input type="checkbox"/>	1 p.m.—8 p.m. <input type="checkbox"/>
Saturday		8 a.m.- 2p.m. <input type="checkbox"/>	1 p.m. – 8 p.m. <input type="checkbox"/>
Sunday:		8a.m.- 2 p.m. <input type="checkbox"/>	1 p.m.—8 p.m. <input type="checkbox"/>
<b>DCHS Office Use Only</b>			
Date Received _____		Time Received _____	Received By _____

Type of School	Name and Location of School	Did you Graduate?	Degree or Diploma	Major Field of Study
High School				
College Or Universities				
Technical, Vocational, Or Business Schools				

**References**– List name, telephone number and relationship to person for three references below. By your signature on this application you are giving authorization for DCHS to contact these references.

<u>Name</u>	<u>Professional/Personal</u>	<u>Phone Number</u>	<u>Years Known</u>

## EMPLOYMENT HISTORY

The information you provide in reference to your employment history must accurately reflect all significant duties performed. Summaries of work experience should include and clearly describe any and all qualifications for this position.

1. Include **all** employment. Begin with your current or last position and work back to your first.
2. Employment history should include **each position** held, even if it is with the same employer.
3. Give a brief summary of the responsibilities of each position you have held.

If you need additional space to describe your employment history, please attach a typed employment history providing the same information as in the following section.

Position Title:		Immediate Supervisor Name & Position:	
Employer:			May we contact them?
Mailing Address:			Please Circle One: Full-Time Part-Time Temp/Project
City, State & Zip:			
Employer's Telephone No.:			
Starting Date		Leaving Date	Final Salary/Wage:
Summary of experience:			

Position Title:		Immediate Supervisor Name & Position:	
Employer:		May we contact them?	
Mailing Address:		Please Circle One: Full-Time Part-Time Temp/Project	
City, State & Zip:			
Employer's Telephone No.:			
Starting Date	Leaving Date	Final Salary/Wage:	
Summary of experience:			

  

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Summary of experience:			

  

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Employer:		May we contact them?	
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City, State & Zip:			
Employer's Telephone No.:			
Starting Date	Leaving Date	Final Salary/Wage:	
Summary of experience:			

**Comments**—including explanation of any gaps in employment

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## DCHS STAFF AGREEMENT and CODE OF CONDUCT

(Please read and initial each line):

- \_\_\_\_\_ I have accurately and truthfully completed the Employment Application and I give my permission to DCHS to verify any of the information in the application.
- \_\_\_\_\_ I agree to abide by the policies and procedures of DCHS, during my time as a member of the staff. I will conform to all rules and regulations commonly applying to employees of DCHS, including safety, discrimination, harassment, and confidentiality.
- \_\_\_\_\_ I will confide all comments, questions, suggestions, whether positive or negative, to my immediate supervisor.
- \_\_\_\_\_ I give consent to DCHS to use any photographs taken of me on property or at a special event for public relation purposes.
- \_\_\_\_\_ As a staff worker, I acknowledge that I will be acting entirely at my own risk. I am aware of the dangers inherent in handling animals and the potential hazards inherent in the normal course of work at DCHS. Should I have concerns or questions about tetanus or rabies vaccinations, I am encouraged to consult a physician to decide whether or not to be vaccinated at my own expense.
- \_\_\_\_\_ I hereby release, discharge and indemnify DCHS, its agents, employees, directors, officers and insurance carriers from any and all claims, damages, and judgments present or future, whether known or unknown, on account of any personal or bodily injury and/or on account of any damage to personal property suffered and sustained by me from any incident caused or arising out of, during or in connection with, any volunteer work for or on behalf of DCHS.
- \_\_\_\_\_ I understand and agree that the terms of this agreement shall be binding upon my heirs, my assignees, my personal representatives and myself.
- \_\_\_\_\_ I understand DCHS has the right to terminate this agreement at its discretion.

### I further agree to:

- Support the goals and efforts of DCHS with a positive attitude.
  - Approach my job responsibilities with professionalism.
  - Treat all animals with kindness.
  - Promote goodwill by handling contacts with staff, volunteers, and the public in a spirit of courtesy and cooperation.
  - Report to my job physically and mentally fit for duty. DCHS is a drug free workplace and use or possession of firearms or weapons of any kind are prohibited.
  - Deal fairly with all DCHS colleagues, co-workers, supervisors, customers, visitors, volunteers, etc., without regard to their gender, race, ethnicity, religion, creed, age, sexual orientation, marital status, national origin, ancestry, citizenship, military status, veteran status, handicap or disability.
  - Contact the Executive Director if I feel discriminated against or harassed by someone in connection with my work.
  - Only serve as agency representative in the community or media spokesperson when authorized to do so by DCHS management.
  - Correct, when possible, misleading or inaccurate information and representations made by others concerning DCHS policies, practices and procedures.
  - Maintain and safeguard the confidentiality of all business, donor, employee, volunteer and animal records, credit and financial information, and/or any information relating to the operation of the agency that is not known or readily accessible to the public.
  - Observe all safety and security rules in the performance of my staff job duties.
  - Report accidents, injuries, fire, theft or other unusual incidents immediately after occurrence or discovery.
  - Avoid engaging in any conduct that is or could be perceived as a conflict of interest. Refrain from using DCHS property, services or supplies for personal reasons unless given prior permission by the Executive Director.
- Contact the Executive Director if I have questions or concerns about DCHS policies, procedures, interpersonal communications, or my staff responsibilities.

**I acknowledge that I have read and fully understand the terms and conditions of the foregoing Staff Agreement and Code of Conduct, and I agree that I will comply with the same.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date