

Wagging Tails Dog Walking and Pet Sitting LLC

Employment Application

Wagging Tails Dog Walking & Pet Sitting of Hampton Roads, LLC : Independent Contractor Application

Contact Information:

Name:

E-mail:

Address:

Home Phone:

/Work Phone:

/Cell Phone:

Car Make & Model:

Plate # for DMV check

Areas able to service (10-15 min. from home):

Personal information:

Highest level of education:

Personal References whom you have known for 3 years (not related to you)?

Present and Past Employment (beginning with most recent job):

Company name/Job Title Dates of Employment Supervisor:

Phone:

Reason for Leaving 2. Company name/ Job Title:

Additional Questions:

1. Are you able to stay overnight in a clients home?

2. Are you afraid/allergic to any animals? No Yes, (explain below)

3. Please mark when you are available to care for pets...
 - Before work? No Yes, available times
 - After work? No Yes, available times
 - At lunch (11-2pm)? No Yes
 - Evenings (7-9pm)? No Yes

4. Are there any days you cannot work? No Yes, list times

5. What kind of experience do you have working with animals?

6. Have you ever owned animals? No Yes, What kind and for how many years?

7. Have you ever been arrested? No Yes, What for?

8. Do you have any tickets on your driving record? No Yes

9. Do you have reliable transportation? No Yes

10. Have you ever worked for another pet sitting service? No Yes If yes, Where and for how long?

11. Have you done any pet/house sitting on your own?

12. Why are you applying for this position?

Affirmation of Truth and Comments:

I hereby state that the above information is, to the best of my knowledge, true and accurate. I understand that the company will be processing a background check prior to employment and I agree to allow them to check my background.

Please sign and date

WAGGING TAILS DOG WALKING AND PET SITTING LLC
WAGGINGTAILSOFWMBG@GMAIL.COM / 757-230-7060