

MORGAN'S PAWS PET CARE CENTER, LLC
305 Hill Street, York, PA 17403
717-755-9544
fax: 717-755-9550
www.morganspaws.com

STATEMENT OF EMPLOYMENT

We would like to thank you for showing an interest in working here. However, we have found in the past that many people do not have a very realistic view of what working in a place like this involves. Please read this letter carefully.

First, you need to understand that the primary purpose of this facility is to take care of other people's pets when they have to go out of town / work. This means that during the summer and around all holidays we are at our busiest. WE CANNOT ALLOW MUCH TIME OFF DURING THESE PERIODS! Think about this very important fact now. If you have to spend Christmas day with your family, this is not the job for you. In addition, since this business is seasonal in nature, you can expect your hours or days to vary according to our needs. The pets must be cared for 7 days a week, so weekend work and evening work is a MUST. We realize that working under these conditions can be pretty difficult for some people, but that is the nature of the business and your DEPENDABILITY in this area is critical. If you don't think you can be that flexible, you should really seek employment elsewhere.

If you do not have a genuine love of animals, you do not need to be here. But keep in mind that we are seeking people who are mature enough to understand and accept the responsibilities we will place on them. You are NOT going to be paid to sit around and play with cute little puppies & kitties all day. Someone has to clean up after them, feed them, administer medications, and see to their comfort and security. This requires a lot of hard work and dedication.

While working here you will be exposed to: filth, loud noises, harsh chemicals, a variety of parasites and zoonoses (medical ailments that people can acquire from animals) and the ever present risk of being bitten, scratched or mauled. These are the potential hazards you face and accept by working here.

You should also know that with very few exceptions there are NO specialists here. You will be expected to perform any task we require of you. We will try to make the best use of your skills and experience, but don't expect to be exempt from the more mundane and unpleasant chores that need to be performed. Floors need to be mopped, cages cleaned, trash cans emptied, and feces cleaned up. If you get ill at the idea of cleaning up diarrhea or vomit, then you are in the wrong place. If you can't pick up a 50 pound bag of food by yourself, this isn't the right place for you. If you are allergic to animal hair or sensitive to chemicals, now is the time to leave.

We are looking for mature, responsible people. You must be reliable, patient, intelligent, and capable of independent action. If you have to be constantly supervised, or you cannot find things to do on your own, then you are not the person we are looking for.

We take our profession very seriously. If you wish to work here, then you must too. If you can make this commitment, then proceed to fill out your job application.

Thank you,

Leticia Giese, Owner
Morgan's Paws Pet Care Center, LLC

Please sign here to acknowledge you have read and understand the above letter.

Signature

Printed name

Date signed

MORGAN'S PAWS PET CARE CENTER LLC
305 HILL STREET • YORK, PA 17403
717-755-9544 PHONE • 717-755-9550 FAX
info@morganspaws.com

\$10.00 / hour
Full-Time / Part-Time

EMPLOYMENT APPLICATION

TODAY'S DATE: ____/____/____ DATE AVAILABLE TO START: ____/____/____

FULL NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EMAIL ADDRESS: _____

SOCIAL SECURITY #: _____

POSITION APPLYING FOR: GROOMER • DOG HANDLER • FRONT DESK

How did you hear about us?: _____

ARE YOU OVER 18 YEARS OF AGE: YES / NO (You must be 18 to work here)

ARE YOU A CITIZEN OF THE UNITED STATES? YES / NO

TYPE OF EMPLOYMENT DESIRED? FULL-TIME / PART-TIME

HAVE YOU EVER PLED GUILTY OR BEEN CONVICTED OF A CRIME? YES / NO

IF YES, PLEASE EXPLAIN: _____

EDUCATION:

HIGH SCHOOL: _____

DID YOU GRADUATE: YES / NO

COLLEGE OR TRADE SCHOOL: _____

MAJOR: _____

DID YOU GRADUATE: YES / NO

REFERENCES:

Please list 3 names, addresses and phone #'s of people whom you are not related and by whom you have not been employed.

NAME: _____ PHONE: _____

ADDRESS: _____

NAME: _____ PHONE: _____

ADDRESS: _____

NAME: _____ PHONE: _____

ADDRESS: _____

1. HAVE YOU EVER OWNED A DOG? YES / NO
IF SO, WHAT BREED: _____

2. DO YOU HAVE A LOUD, STRONG VOICE? YES / NO

3. ARE YOU AFRAID OF DOGS EVEN THE SLIGHTEST BIT? YES / NO

4. HAVE YOU EVER WORKED IN A PLACE THAT TOOK CARE OF ANIMALS? YES / NO

5. ARE YOU ABLE TO WORK WEEKENDS, NIGHTS AND HOLIDAYS? YES / NO
If you answer NO to weekends and holidays you will not get the job. We are open 365 days a year.

6. WHY ARE YOU INTERESTED IN THIS POSITION?

7. WHAT HOURS ARE YOU AVAILABLE TO WORK?

Our hours are Monday-Friday 6:00AM to 9:00PM and Saturday-Sunday & Holidays 6:00AM to 9:00PM.

8. SUMMARIZE YOUR SPECIAL SKILLS AND/OR QUALIFICATIONS FOR THIS TYPE OF JOB.

9. ARE YOU RELIABLE AND HAVE TRANSPORTATION?
YES OR NO

PREVIOUS EMPLOYMENT (begin with most recent)

1. DATES OF EMPLOYMENT: FROM: __/__/__ TO: __/__/__

POSITION HELD: _____

NAME OF PLACE: _____

ADDRESS: _____

CONTACT NUMBER: _____

SUPERVISOR: _____

STARTING SALARY: _____ ENDING SALARY: _____

REASON FOR LEAVING: _____

MAY WE CONTACT THIS EMPLOYER? YES OR NO

2. DATES OF EMPLOYMENT: FROM: __/__/__ TO: __/__/__

POSITION HELD: _____

NAME OF PLACE: _____

ADDRESS: _____

CONTACT NUMBER: _____

SUPERVISOR: _____

STARTING SALARY: _____ ENDING SALARY: _____

REASON FOR LEAVING: _____

MAY WE CONTACT THIS EMPLOYER? YES OR NO

3. DATES OF EMPLOYMENT: FROM: __/__/__ TO: __/__/__

POSITION HELD: _____

NAME OF PLACE: _____

ADDRESS: _____

CONTACT NUMBER: _____

SUPERVISOR: _____

STARTING SALARY: _____ ENDING SALARY: _____

REASON FOR LEAVING: _____

MAY WE CONTACT THIS EMPLOYER? YES OR NO

I CERTIFY THAT MY ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE YOU TO MAKE SUCH INVESTIGATIONS AND INQUIRIES OF MY PERSONAL, EMPLOYMENT, EDUCATIONAL, FINANCIAL, OR MEDICAL HISTORY AND OTHER RELATED MATTERS AS MAY BE NECESSARY FOR AN EMPLOYMENT DECISION. I HEREBY RELEASE EMPLOYERS, SCHOOLS OR PERSONS FROM ALL LIABILITY WHEN RESPONDING TO INQUIRIES IN CONNECTION WITH MY APPLICATION. IN THE EVENT I AM EMPLOYED, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW MAY RESULT IN DISCHARGE.

SIGNATURE OF APPLICANT: _____

DATE SIGNED: _____