



**CENTRAL FLORIDA
ANIMAL RESERVE**
Compassion. Conservation.
Commitment.

Employment Application

Please note: All applicants must be over 18 to apply.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: _____ Email _____

Work Interests : _____ Desired Pay:\$ _____

Rank the following divisions in ascending order with 1 being your most preferred interest and 6 being the least.

Tours & Events Advocacy Administrative Management Animal Care Projects/Maintenance

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever been convicted of a felony? YES NO I have my own transportation YES NO

If yes, explain: _____

Are you able to perform the essential functions of the position with or without accommodations? Yes No

Applying for: _____ **I am able to:** Work Holidays?

Any Available position Specific Position: _____ Yes No

I am seeking a permanent position: Yes No I can work the following days: (check all that apply)

I will be able to report to work
_____ days after being notified I am hired.
 Mon Tues Wed Thurs Friday
 Sat Holidays

Date Available: _____

Education

High School: _____ **Address:** _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ **Address:** _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ **Address:** _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

3 Most Recent Jobs

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Pay: \$ _____ Ending Pay: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Pay: \$ _____ Ending Pay: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Pay: \$ _____ Ending Pay: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Current Schedule of Availability

Number of hours you can work per week: _____

The below schedule reflects my availability from this date: _____ until this date: _____

Place the letter A in all the time slots that you are *available* to work. (If filling this out electronically type in your availability for each day.)

	Mon	Tues	Wed	Thurs	Fri	Sat
8:30 AM						
9:00 AM						
9:30 AM						
10:00 AM						
10:30 AM						
11:00 AM						
11:30 AM						
12:00 PM						
12:30 PM						
1:00 PM						
1:30 PM						
2:00 PM						
2:30 PM						
3:00 PM						
3:30 PM						
4:00 PM						
4:30 PM						
5:00 PM						
5:30 PM						
6:00 PM						

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

Please submit this completed form and your most up to date resume to careers@cflar.org