

Instructions

Please complete all fields to be considered for employment with Mohawk Hudson Humane Society (MHHS).

Return your application by mail to: Mohawk Hudson Humane Society Attention: Human Resources 3 Oakland Ave. Menands, NY 12204

Or by email: HR@mohawkhumane.org

Our Core Values

- *Compassion*: We foster a kind and gentle environment for animals and people.
- *Advocacy*: We create partnerships to educate, protect, and prevent cruelty to animals.
- *Respect*: We acknowledge and value each person's contribution to our organization.
- *Excellence*: We cultivate organizational quality and innovation.
- *Stewardship*: We are accountable for all resources entrusted to us to ensure our future.

Our Employment Policies

- Applicants must be 18 years or older, authorized to work in the United States, and possess a high school diploma/equivalent (GED) or applicable professional experience.
- Offers of employment are contingent upon satisfactory background and reference checks.
- Applicants with the following convictions will not be considered for employment: violent crimes, firearms offenses, animal cruelty, arson, assault, child or elder abuse, sexual abuse/misconduct, stalking, fraud.
- We welcome applications from individuals with criminal histories not listed above. Other convictions will be considered on a case by case basis.



Contact Information

| Candidate's Name: | Date: |
|--|-----------------------------------|
| Address: | |
| Telephone Number: | Email: |
| | |
| Eligibility | |
| Are you 18 years of age or older? | No |
| Are you either a U.S. citizen or an alien authoriz | zed to work in the U.S.? Yes No |
| Have you ever pled guilty, no contest, or been c | onvicted of a crime? |

Please share any comments you would like us to consider regarding your criminal history.

Statement of Interest

In a few words, please tell us what you know about MHHS and why you want to work with us.



Availability and Position

| Position Desired: | | | | |
|--|--|--|--|--|
| Start Date Available: | | | | |
| How many hours are you looking to work per week? | | | | |
| □ Full-Time (36-40 hours) □ Part-Time (20-35 hours) □ Part-Time (less than 20 hours) | | | | |
| Please indicate which days you are available to work. | | | | |
| □ Monday □ Tuesday □ Wednesday □ Thursday □ Friday □ Saturday □ Sunday | | | | |
| Have you previously worked for MHHS? Yes No | | | | |
| Have you previously volunteered for MHHS? Yes No | | | | |
| Dates of employment or volunteerism with MHHS: fromtoto | | | | |
| Former supervisor(s) at MHHS: | | | | |

Education

Please indicate your highest level of education.

- □ Some high school, did not graduate or receive equivalent
- □ High school diploma or GED
- □ Some college, did not graduate
- Completed technical school
- □ Associates degree
- □ Bachelors degree
- □ Masters degree
- Doctorate degree
- □ Some high school, did not graduate or receive equivalent
- □ Other: _____



Please list the educational institution(s) you have attended and any majors and/or degrees received.

Please share any other education, training, or special skills that you believe would make you a strong candidate for this position.

Work Experience

| Optional: Ye | ou may attach a | resume or CV | on separate sheets. |
|--------------|-----------------|--------------|---------------------|
|--------------|-----------------|--------------|---------------------|

| Are you currently employed? | □ Yes □ No | | | |
|---------------------------------------|----------------|--|--|--|
| Name and Address of Current Employer: | | | | |
| | | | | |
| Start Date: | Position Held: | | | |
| Name of Supervisor: | | | | |
| Description of Duties: | | | | |
| May we contact? | □ Yes □ No | | | |



References

Please identify at least one person who knows your work, beginning with the most recent. Acceptable references include current/past employers, teachers, supervisors, or mentors.

| Name: | Address: |
|---------------|--------------|
| Phone Number: | Email: |
| Relationship: | Years Known: |
| Name: | Address: |
| Phone Number: | Email: |
| Relationship: | Years Known: |



Authorization and Acknowledgments

I affirm that the information I have provided in this application is true to the best of my knowledge, information and belief, and I have not knowingly withheld any information requested. I understand that withholding or misstating any information requested in this application is grounds for rejection of my application, and that providing false or misleading information in this application is grounds for discharge.

I authorize the company to verify my references, record of employment, education record, and any other information I have provided. Unless otherwise noted, I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers and all other persons and entities, from any and all claims, demands or liabilities arising out of or in any way related to such inquiry or disclosure.

Candidate's Signature

Date