Submit application to:
466 Angliana Avenue
Lexington, KY 40508
(859) 255-2275
www.uptownhounds.com
jobs@uptownhounds.com

America's

Uptown Hounds
Luxury Resorts

RECRUITMENT APPLICATION

PERSONAL INFORMATION

Last Name

First Name

MI

Address

City

State

Zip

Phone Number

Email Address

POSITION/AVAILABILITY

For what position are you applying?

Position type desired: ☐ Full Time ☐ Part Time   If part time, number of hours available weekly:

EMPLOYMENT EXPERIENCE
Please list most recent first.

Date (Month & Year)	Company Name & Address	Manager & Phone Number	Position/Duties	Reason for Leaving
From To				
From To				
From To				
From To				

EDUCATION/TRAINING

Please list most recent first.

Institution	City, State	# of Years	Did you graduate?	Degree/Certification
			☐YES ☐NO	
			☐YES ☐NO	
			☐YES ☐NO	
			☐YES ☐NO	

BACKGROUND

Please describe specific skills, qualifications, or experience that would make you an integral part of the America's Uptown Hounds Luxury Resorts team in your area(s) of interest:

Describe your animal-related experiences. Have you dealt with a dog or cat in a medical emergency or with an injury? Have you been in a situation with an aggressive or fearful dog or cat?

Have you ever been convicted of a misdemeanor or felony offense?   ☐YES   ☐NO
If yes, please explain and include dates:

REFERENCES

We at America's Uptown Hounds Luxury Resorts believe that past performance is a great indicator of future potential! Please provide information for two professional and one personal reference who you have known for at least one year.

Name	City, State, Phone Number	Occupation	Relationship to You	Years Acquainted

How did you hear about Uptown Hounds recruitment?

SIGNATURE

I certify that all responses provided on this application are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application and understand that, if this application should lead to employment, misrepresentation or omission of facts called for is cause for dismissal.

Please sign or, for electronic submittal, type your first and last name in all capital letters to indicate agreement with the above statement.

Date