

I certify that the facts set forth in this Application of Employment, in my résumé and in the other materials I have submitted are true and complete. I understand and acknowledge that false information provided by me will result in disqualification from employment or in dismissal from employment if an offer of employment has been made and accepted. I understand that my employment will be contingent, if selected, on my completion of the pre-employment process which may include a background check and drug screen. I authorize the company to perform a drug screen and will sign all authorizations related to complete a criminal background check if I am conditionally offered a position of employment.

I hereby authorize DePorre Veterinary Hospital (hereinafter "DVH" or "Company"), to contact all my former and current employers, educational institutions, military entities, and the other references I have provided regarding me and my performance record, work, academic and/or military experience. I hereby authorize my current and former employers, educational institutions, military entities, and the other references I have provided to disclose to DVH all information regarding me.

I also hereby release DVH and its employees and agents, and all of my former and current employers, educational institutions, military entities, and the other references I have provided, from any and all liability and damages for releasing or using information concerning me and my performance record and work, academic and/or military experience. I also hereby waive any right under the Bullard-Plawecki Right to Know Act, 1978 PA 397, to receive written notice from Company or any former or current employer, that disciplinary reports, letters of reprimand, or other disciplinary action taken against me while employed, will be or have been disclosed to a third person or entity.

I also understand that DVH may conduct a conviction-only criminal background history search on me. I hereby consent to this search being conducted and to the disclosure of the results of that search. I further hereby release the individual or entity conducting the search, Company and its employees and agents, from any and all liability, claims and damages, including but not limited to, claims for releasing or using any information revealed as a result of this search. I also understand and acknowledge that criminal convictions may result in disqualification from employment with DVH or in my dismissal from employment if an offer of employment has been made and accepted.

In consideration of my employment I agree and understand that my employment, compensation, and benefits can be terminated with or without notice, and with or without cause, at either my option or at the option of DVH, it being mutually understood and agreed that my relationship with Company is one of employment at will. No representatives of DVH, other than Dr. Pierre DePorre, has any authority to enter into any agreement for employment for any period of time or to make any agreement contrary to the foregoing, and any such agreement must be in writing and signed by Dr. Pierre DePorre.

I further recognize that if employed by DVH, I agree, in consideration of my employment, to file any claim or lawsuit arising out of or in any way related to my employment and/or cessation of my employment within one hundred-eighty (180) days after the claim(s) arise(s) or within the applicable statutory limitations period(s) provided by law, whichever occurs first, and my failure to do so shall act as a bar to any claim that I may have.

If I am employed by DVH, I understand that additional personal data will be required for statistical purposes. I will abide by all policies, rules and regulations of Company.

I understand that if I have a disability I must timely tell DVH in writing of my need for accommodation within one hundred-eighty two (182) days after I know or reasonably should know that an accommodation is needed. I further understand failure to do so will prevent me from alleging a violation of the accommodation requirements otherwise imposed by applicable law.

I understand that it is the policy of DVH to maintain a work place free from the effects of both illegal drugs and/or alcohol. I understand and agree I may be tested for illegal drug and alcohol use during my employment as Company deems necessary in its sole discretion. My refusal to take a test, altering the results of a test, tampering with my sample, or failing the test will disqualify me from employment. I understand a drug test may be required prior to employment and any time during my employment at the sole discretion of Company. I agree, if employed, to submit to a job related medical exam at any time at Company's request. I consent to have the results of any post offer, pre-employment or post employment medical examination I am required to undergo disclosed to DVH. I also acknowledge that if hired I may be required to submit to medical/physical examinations which are job related and consistent with business necessity.