



Grooming • Boarding • Daycare
By Seiji Morikawa, Certified Groomer
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Groomer Mentorship Program Application for Admission

PERSONAL INFORMATION:

First Name /Middle Initial/ Last Name

Street Address / City, State, Zip

Phone Number

E-mail address

(____) _____

AVAILABILITY: Days/Hours

Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Saturday ___ Sunday ___

What date are you available to start the program? _____

EDUCATION:

Name and Address of School - Degree/Diploma - Graduation Date

Other relevant training

EMPLOYMENT HISTORY:

Current Or Last Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____ Email: _____

Position Title: _____ From: _____ To: _____

Responsibilities: _____

Previous Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____ Email: _____

Position Title: _____ From: _____ To: _____

Responsibilities: _____

On a separate sheet of paper, please write a short essay indicating the reason why you would like to learn to be a groomer.

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature _____ Date _____