



APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer. Applicants are considered for positions without regard to race, religion, sex, national origin, age, disability, sexual orientation or any other consideration made unlawful by applicable federal, state, or local laws.

We appreciate that you complete all sections neatly. Feel free to use reverse side if more room is needed.

Name: _____ Address: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Position Desired: _____ Full-time _____ or Part-time _____

Specify days and times (AM or PM) that you Are Available to work:

Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____

Specify days and times (AM or PM) that you are Not Available to work:

Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____

Due to the business needs of the hospital, flexibility is sometimes needed. Are you available to work unscheduled hours? Yes _____ No _____

Are you legally eligible to work in this country? _____ Have you ever been convicted of a crime? _____

Education

High School _____ Years Attended _____ Did you graduate? _____

College _____ Years Attended _____ Degree/Major _____

Business/Tech/Trade School _____ Years Attended _____ Degree _____

List skills or qualities you have which may be beneficial to the job for which you are applying, (for example: communication, organizational, technical, computer, lab or office equipment, etc.) _____

Work Experience Start with most recent

Employer _____ Address _____ Phone _____

Dates Employed from: _____ to: _____ Reason for leaving _____

Job Title _____ Supervisor _____ May we contact? Yes ___ No ___

Duties _____ Starting Salary _____ Ending Salary _____

Employer _____ Address _____ Phone _____

Dates Employed from: _____ to: _____ Reason for leaving _____

Job Title _____ Supervisor _____ May we contact? Yes ___ No ___

Duties _____ Starting Salary _____ Ending Salary _____

Employer _____ Address _____ Phone _____

Dates Employed from: _____ to: _____ Reason for leaving _____

Job Title _____ Supervisor _____ May we contact? Yes ___ No ___

Duties _____ Starting Salary _____ Ending Salary _____

List accomplishments at your previous jobs _____

What have you enjoyed most about your jobs _____

What have you enjoyed least about your jobs _____

References Please provide business related individuals

Name _____ Title & Relationship to You _____ Phone # _____

Name _____ Title & Relationship to You _____ Phone# _____

Name _____ Title & Relationship to You _____ Phone# _____

I certify that the information on this application is complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

Applicant Signature _____ Date _____