

APPLICATION FOR EMPLOYMENT

I. Name _____ Phone # _____ Date _____
Address _____ How Long _____
Social Security # _____ Number of Children _____ Ages _____

II. BECAUSE OF FEDERAL LAW, ANSWERS TO QUESTIONS IN SECTION II ARE VOLUNTARY AND NOT REQUIRED FOR EMPLOYMENT

Date of Birth _____ Place of Birth _____ Marital Status (circle one) S M D W Sep
Spouse's Name _____ Spouse's Occupation _____

III. Do you have any hourly limitation for working? _____ If so, what? _____
Whom should we notify in case of emergency? _____
Their phone number _____ Relationship _____

IV. Have you had any past experience in the chiropractic, medical, dental or osteopathic fields:
(Circle one) Yes No If so, please describe: _____

V. Past employment - Start with most recent employment:

A. Past employment (company name and address) _____

How Long? _____ Salary _____ Phone _____

Describe your job/responsibilities _____

What did you enjoy most about this position? _____

What did you enjoy least? _____

B. Past employment (company name and address) _____

How Long? _____ Salary _____ Phone _____

Describe your job/responsibilities _____

What did you enjoy most about this position? _____

What did you enjoy least? _____

C. Past employment (company name and address) _____

How Long? _____ Salary _____ Phone _____

Describe your job/responsibilities _____

What did you enjoy most about this position? _____

What did you enjoy least? _____

VI. Education/Skills

Highest Level of Education Attained: (Circle one) 12 13 14 15 16 16+

List any degrees you have obtained:

CA _____ BS _____

RN _____ BA _____

LPN _____ Other (specify) _____

RT _____ Other (specify) _____

Check skills you have aquired:

Typing _____ Accounting _____

Telephone Communication _____ Bookkeeping _____

Other special skills (specify) _____

I AUTHORIZE ALL SCHOOLS, CREDIT BUREAUS AND LAW ENFORCEMENT AGENCIES TO SUPPLY INFORMATION CONCERNING MY BACKGROUND. I UNDERSTAND THAT I HAVE A RIGHT TO REQUEST DISCLOSURE OF THE NATURE, SCOPE AND RESULTS OF SUCH AN INQUIRY. I UNDERSTAND THAT IF ANY STATEMENT HEREIN IS NOT TRUE, OFFERS OF EMPLOYMENT MAY BE WITHDRAWN.

(SIGNED)

(DATE)