APPLICATION FOR EMPLOYMENT (Please Print Clearly)

Confidential

Personal Inform	nation				Date of Application				Date Available ₋			
Name	_ast				First			Middle		•		
Present Address									. Phone I	Number		
Permanent Address (if Different than	St	treet			City		State	Zip Code				
Present Address)	St	treet			City		State	Zip Code	_ Phone !	Number		
If you cannot be reach	ed at above pho	one number, p	lease g	give al	ternate num	ber.	Phone N	lumber				
Employment De						Will Y	ou Accep	ot Employment of:	□ Full Ti	me? 🖸 Part	Time?	☐ Temporary?
Type of Work	Desired	Shift			Salary	Are Y	ou 18 Yrs	s. of Age or Older	? 🖵 Yes	□ No		
First Choice						Are Y	ou Emplo	yed Now? 🔲 Yes	s 🗆 No			
Second Choice								act Your Present E	mployer?	□ Yes □ I	No	
Third Choice						Learn	Did You Of This ing?					
Education	Circle Highest Grade Comple		10 14	11 15	12 16	Scholas Honors Receive						
	Name of	School		(1	Location City, State)			Courses Taken		Completed	l C	Type of Degree or ertificate Received
High School										□ No □ Yes		
College										No Yes;	<u> </u>	
Vocational or Business										□ No □ Yes; □	,	
Professional Education						,				□ No □ Yes; □ Date	,	
Laboratory or X-Ray Training										No Yes;		
Extracurricular Activities While in Sch	ool						i .			Date		
Member of Professional Organizat	tions											
Honors Received, Volu Service or Other Quali Which You Feel Are Re Position for Which You	fications You Ha elated to the	ave				, , , , , , , , , , , , , , , , , , , ,						
Were you in the U.S. A	rmed Forces?] Yes □ No	If yes	, what	t branch?							
Dates of Duty: From	Month Da	y Year		То	/ Month	Dav	/ Year	Rank at Disc	harge			
	10.											1000 December 2000 - 1000 December 2000 Dece
Professional Lic	Organization or St		ation	5				Date Issued	Numb	er		Verif.
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Present and F	ormer Employers	Dates Employed	Salary Range	Position & Du	ties
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Employment Understanding (Please Read and Sign)

This institution does not discriminate in hiring or any other decision on the basis of race, color, sex, citizenship, national origin, ancestry, Vietnam era veteran status, or on the basis of age or physical or mental disability unrelated to ability to perform the work required. No question on this application is intended to secure information to be used for such discrimination.

I voluntarily give this institution the right to make a thorough investigation of my past employment and activities, agree to cooperate in such investigation and release from all liability or responsibility all persons, companies or corporations supplying such information. I consent to take the physical examination, and such future physical examinations as may be required by this institution at such times and places as the institution shall designate. I understand that an offer of employment may be contingent on passing the physical examination which relates to the essential duties I would be required to perform.

I understand that my employment is at will, and that either party is free to terminate the employment relationship at any time without cause. I also understand that my employment may be terminated for any misstatement or omission of fact appearing on this application form.

If employed, I will be required to complete an Employment Verification Form (I-9), and within three days show satisfactory evidence of identity and eligibility for employment.

	Appli	cant's Signature			Date				
P	lease Indicate Days and Hours \ Available For Work (Be Speci	fou Are fic)	Availability Record						
Day	From	То			-	pielikkierikoitoutikoireerinaani			
			Primary position desired						
Sunday	A.M.	A.M.	1401						
	P.M.	P.M.	Will you accept another position? ☐ Yes ☐ No						
			If so, what?						
Monday	A.M.	A.M.		Weekends?	□ Vaa	□ No			
Tuesday	P.M.	P.M.	Are you available to work:	Holidays?	□ Yes □ Yes	□ No			
	A.M.	. A.M.	•	Rotating Shifts?	☐ Yes	□ No			
Tuesday		· A.W.							
	P.M.	P.M.	If your availability changes, it is your responsibility to fill in an "Avai						
10/	A.M.	A.M.	Card" indicating the changes. Such changes will be effective, then, for future employment.						
Wednesday	P.M.	P.M.							
Thursday	A.M.	A.M.	Lundaratand that amarga	aguira ma ta tampararib					
	P.M.	P.M.	scheduling change as directed by my department head or administrate						
Friday	A.M.	A.M.							
	A.IVI.	A.M.							
	P.M.	P.M.	·						
Saturday	A.M.	A.M.	Applicant's S		Date				
	P.M.	P.M.							