

RGV Music Therapy and Wellness Center Application For Independent Contracting



Please print or type.
The application must be fully completed to be considered.
Please complete each section, even if you attach a resume.

Personal Information

Name _____

Address _____		City _____	State _____	Zip _____
Phone Number _____	Mobile Number _____	Email Address _____		
Are You A U.S. Citizen? Yes _____ No _____		Have You Ever Been Convicted Of A Felony? Yes _____ No _____		
If selected for an interview, will you be available in person? (Alternate methods of interview may be provided upon request) Yes _____ No _____				
Are you comfortable speaking Spanish? Yes _____ No _____ Specify: _____				

Position

Title: Music therapist	Certification #:	Available Start Date	Desired Pay
Requested Hours per Week _____			

Education

School Name	Location	Years Attended	Degree Received	Major

References

Name	Title	Company	Phone

Employment History

Employer (1)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Employer (2)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
Employer (3)	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge. If this application leads to independent contracting with RGV Music Therapy and Wellness Center, I understand that false or misleading information in my application or interview may result in my termination.

Name (Please Print)	Signature
Date	