

Employment Application

Healthcare Positions — [Your Practice / Organization Name]

We are an Equal Opportunity Employer. All qualified applicants will receive consideration without regard to race, color, religion, sex, national origin, disability, or protected veteran status.

POSITION

Position Applying For

Date Available to Start

Employment Type Desired

☐ Full-Time

☐ Part-Time

☐ PRN / Per Diem

☐ Temporary

Desired Hourly Rate / Salary

How did you hear about us?

PERSONAL INFORMATION

Full Legal Name

Street Address

City / State / ZIP

Phone

Email

Date of Application

ELIGIBILITY

Are you legally authorized to work in the United States?

☐ Yes

☐ No

Are you at least 18 years of age?

☐ Yes

☐ No

Have you ever been convicted of a felony?

☐ Yes

☐ No

If yes, please explain:

Do you hold a current, unrestricted healthcare license/certification relevant to this role?

☐ Yes

☐ No

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LICENSURE & CERTIFICATION

License / Certification Type (e.g., RN, LPN, CNA, CMA)

License Number

State

Exp. Date

Additional Certifications (BLS, ACLS, PALS, etc.)

EDUCATION

High School

School Name

Degree / Program

Graduated

College / University

School Name

Degree / Program

Graduated

Other (Certification Program, etc.) School Name

Degree / Program

Graduated

EMPLOYMENT HISTORY (most recent first)

Employer 1

Position Held

Dates Employed

Reason for Leaving

Employer 2

Position Held

Dates Employed

Reason for Leaving

PROFESSIONAL REFERENCES

Reference 1: Name

Relationship

Phone

Reference 2: Name

Relationship

Phone

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that any misrepresentation or omission may disqualify me from employment or result in dismissal. I authorize verification of the information provided, including licensure, education, and employment history.

Applicant Signature

Date