

Have you ever been employed under another name? Yes ____ No ____ If yes, what name? _____

Have you ever been convicted? Yes, ____ No ____ (A conviction will not necessarily disqualify an applicant)

If yes, please explain:

Are you over 18 years of age? Yes ____ No ____

Are you authorized to work in the United States? Yes ____ No ____
(Federal Law requires proof of identity and employment authorization for all new employees)

Can you perform the essential functions of the position for which you are applying? Yes ____ No ____ (If you have any questions as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question)

EDUCATION		
EDUCATION (Circle last year completed)	SCHOOL NAME	MAJOR SUBJECTS
High School 1 2 3 4	_____	_____
College 1 2 3 4	_____	_____
Other (Business, Vocational, Military)	_____	_____

Have you completed any special courses, seminars, and/or training that would enable you to please list any skills or other qualifications perform the position for which you are applying? If so, please list which you believe should be considered in evaluating your qualifications for employment:

REFERENCES

Please provide four professional, work references (not including relatives)

NAME	ADDRESS	PHONE	OCCUPATION

I certify that the answers given by me to the foregoing questions and statements are true, accurate and complete. I understand that the falsification, misrepresentation or omission of fact on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.

Questions regarding this statement should be directed to any employment interviewer before signing. The application will be given every consideration, but its receipt does not imply that the applicant will be employed.

It is the policy of the practice to afford equal opportunity to all employees and applicants for employment without regard to race, color, religion, age, sex (except where sex is a bonafide occupational qualification), sexual orientation, marital status, individuals with disabilities, and equally to disabled Veterans and Veterans of the Vietnam era, and any other characteristics protected by Federal, State or Local Law.

I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information and I also release the practice from any liability that might result from making an investigation.

I understand that any offer that may be extended to me will be contingent upon the successful completion of a background screening and drug and alcohol test. If hired, I agree to abide by all of the practice rules and regulations and I understand that, if employed, my employment may be terminated at any time, at the option of either the practice or me. I further understand that no representation, whether oral or written by any representative or agent of the practice, at any time, can constitute a contract of employment.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me. The practice is hereby authorized to release to any other firm or person with whom I may seek employment, any and all information concerning my employment.

Signature

Date