



Date Received: \_\_\_\_\_

### Application for Employment

(Resume's are accepted in addition to this employment application)

#### Applicant Information

Position Applying For: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Address: \_\_\_\_\_ City & Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work/Mobile: (\_\_\_\_) \_\_\_\_\_

Desired Salary Range: \_\_\_\_\_ May we contact you at your current place of work? \_\_\_\_\_

Have you ever been convicted of or pled guilty/no contest to any crime other than a minor traffic violation? (A "yes" answer to this question will not necessarily disqualify a candidate from employment) \_\_\_\_\_

If yes, please give details: \_\_\_\_\_

Have you ever been discharged or asked to resign from any job? (A "yes" answer will not necessarily disqualify you from employment) \_\_\_\_\_ If yes, please give details: \_\_\_\_\_

#### Educational History (Please be as specific as possible)

High School Attended: \_\_\_\_\_ Dates Attended: \_\_\_\_\_

Grade Completed: \_\_\_\_\_ Honors/Awards Received: \_\_\_\_\_

Extra-Curricular Activities: \_\_\_\_\_

College Attended: \_\_\_\_\_ Dates Attended: \_\_\_\_\_

Degree: \_\_\_\_\_ Honors/Awards Received: \_\_\_\_\_

Other Higher Education: \_\_\_\_\_ Dates Attended: \_\_\_\_\_

Course/Major: \_\_\_\_\_

Professional licenses, certification(s), and/or professional memberships: \_\_\_\_\_

#### Employment History (Please be as specific as possible)

Present/Most Recent Employer: \_\_\_\_\_ Date(s): \_\_\_\_\_

Address: \_\_\_\_\_ City & Zip: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Present Salary: \_\_\_\_\_

Supervisor & Title: \_\_\_\_\_ Phone Extension: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Date Received: \_\_\_\_\_

Reasons For Leaving: \_\_\_\_\_  
\_\_\_\_\_

Previous Employer: \_\_\_\_\_ Date(s): \_\_\_\_\_

Address: \_\_\_\_\_ City & Zip: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Present Salary: \_\_\_\_\_

Supervisor & Title: \_\_\_\_\_ Phone Extension: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Reasons For Leaving: \_\_\_\_\_  
\_\_\_\_\_

Previous Employer: \_\_\_\_\_ Date(s): \_\_\_\_\_

Address: \_\_\_\_\_ City & Zip: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Present Salary: \_\_\_\_\_

Supervisor & Title: \_\_\_\_\_ Phone Extension: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Reasons For Leaving: \_\_\_\_\_  
\_\_\_\_\_

Personal Reference

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Personal Reference

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Personal Reference

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Professional Reference

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Professional Reference

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Professional Reference

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

**ALL OFFERS OF EMPLOYMENT ARE CONTINGENT UPON A SATISFACTORY BACKGROUND CHECK AS DETERMINED BY MOORE ORTHOPAEDIC CLINIC AND VERIFICATION OF ALL INFORMATION CONTAINED IN THE EMPLOYMENT APPLICATION AND ANY OTHER MATERIALS PROVIDED. YOUR DATE OF BIRTH WILL BE REQUIRED FOR THIS BACKGROUND CHECK.**

**APPLICANT'S CERTIFICATION AND AGREEMENT**

My signature below certifies that the foregoing statements are true and complete to the best of my knowledge and belief. I hereby authorize the verification of all information set forth in this application for employment. I understand that any false, incomplete, or misleading information will be grounds for rejection of this application or, if subsequently discovered, grounds for termination. I understand that my employment will be "at will," which means that I may terminate the employment relationship at any time, with or without notice or cause, and that the employer retains the same rights.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_