



# Application for Employment

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Position Applying For: \_\_\_\_\_ Date Available: \_\_\_\_\_

Type of Employment Desired: Full-Time Part-Time Student Intern Resident Volunteer

Location Applying For:

- Administration       Bell       Branford       Chiefland       Gainesville
- High Springs       Lake City (Dental)       Lake City (Medical)       Live Oak       Trenton (Adults)
- Trenton (Pediatrics)       Trenton (Dental)       Starke       Williston       Other: \_\_\_\_\_

Referral Source and Name: \_\_\_\_\_

If you are under the age of 18, and it is required, can you furnish a work permit?  Yes  No  
If no, please explain \_\_\_\_\_

Have you ever been employed with this company before?  Yes  No  
If yes, give dates and position \_\_\_\_\_

Are you legally eligible for employment in this country?  Yes  No

Are you able to meet the attendance requirements of this position?  Yes  No

Have you ever been convicted, pled guilty or pled nolo contendere (no contest) to any criminal offense other than a minor traffic violation? Criminal offense includes but is not limited to a felony, a misdemeanor, or driving while impaired.  Yes  No

(Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of offense, seriousness and nature of the violation, rehabilitation and position applied will be taken into account.)

**Employment History**

Please list previous employment beginning with most recent employer

Employment Dates

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_  
Ending Pay: \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Supervisor and Title: \_\_\_\_\_  
May we contact this employer?      Yes      No  
Please describe your work responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employment Dates

2. From: \_\_\_\_\_ To: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_  
Ending Pay: \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Supervisor and Title: \_\_\_\_\_  
May we contact this employer?      Yes      No  
Please describe your work responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employment Dates

3. From: \_\_\_\_\_ To: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_  
Ending Pay: \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Supervisor and Title: \_\_\_\_\_  
May we contact this employer?      Yes      No  
Please describe your work responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employment Dates

4. From: \_\_\_\_\_ To: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_  
Ending Pay: \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Supervisor and Title: \_\_\_\_\_  
May we contact this employer?      Yes      No  
Please describe your work responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

	Name and Location	Graduate?	Major/Degree	Course of Study
High School	_____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ _____	_____ _____
College	_____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ _____	_____ _____
Other	_____ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ _____	_____ _____

---

### Certifications

Licensure, Registration or Certification	Number	Date Received	Expiration Date	State Licensing Agency
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### References

Name	Telephone	Years Known
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

---

### Application Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (1) cancel further reconsideration of this application, (2) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations, and organizations for furnishing such information about me.

I also understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on the basis prohibited by applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice. The employer reserves the same rights to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the forgoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.

### **Do Not Sign Until You Have Read the Above Application Statement**

I certify that I have read, fully understand and accept all terms of the forgoing Application Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_