



NORTHWEST RESPIRATORY SERVICES EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY AND AFFIRMATIVE ACTION EMPLOYER
Federal Law prohibits discrimination because of race, creed, color, national origin, sex, age, or disability
PLEASE PRINT

PERSONAL INFORMATION

Date: _____ Position Applied For: _____ Salary Range Desired: _____

Name: _____ Phone Number: _____

Address: _____ City, State, Zip: _____

Prior address if above less then 3 years _____

Social Security Number _____ Are you at least 18? Yes _____ No _____

Do you have legal right to work in the U.S.? Yes _____ No _____

Have you ever been denied a bond? Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

If Yes, please explain _____

Are you available for relocation? Yes _____ No _____

Are you willing to travel? Yes _____ No _____

I am available (check all that apply)

Full Time	_____	Part Time	_____
Temporary	_____	Summer	_____
AM Shift	_____	PM Shift	_____
Weekends	_____	Holidays	_____

Have you ever served in the military? Yes _____ No _____

If Yes, Branch of Service _____ Discharge Date: _____

How were you referred?

Employment Agency	_____	Employee Referral	_____
Job Fair	_____	Magazine Ad	_____
Newspaper Ad	_____	Walk - In	_____
Other	_____	Explain	_____

Have you ever applied to or been employed by Northwest Respiratory Services?

EMPLOYMENT HISTORY

Name of Current or Most Recent Employer

Phone Number

Address

Position

Supervisor Name and Title

Employed From

Starting Salary

Ending Salary

Employed To

Duties and Responsibilities

Reason for Leaving

Additional Information

May we Contact this Employer? Yes _____ No _____

Name of Previous Employer

Phone Number

Address

Position

Supervisor Name and Title

Employed From

Starting Salary

Ending Salary

Employed To

Duties and Responsibilities

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Additional Information

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Employed From

Starting Salary

Ending Salary

Employed To

Duties and Responsibilities

Reason for Leaving

Additional Information

May we Contact this Employer? Yes _____ No _____

* List base salary only. Bonus, commission, incentive, and any other form of additional compensation can be listed in the additional information sections. The ending base salary for a current employer should reflect present and not anticipated earnings.

If position requires driving, this section must be completed

Do you have a valid Driver's License? Yes _____ No _____

Type: Car _____ CDL _____ Mcycl _____ Chff _____ Expiration Date _____

License Number _____ State _____

Years of Driving Experience? _____

Have you ever had your Driver's License suspended or revoked? Yes ___ No ___

If Yes, please explain _____

Driver applicants may be required to furnish a current copy of their Motor Vehicle Record, obtainable from the Driver's License Division of the Secretary of State. An unsatisfactory record will automatically disqualify an applicant for this type of position only. Do you understand this qualification? Yes ___ No ___

Educational Background

School	Name and Address of School	Graduate? Yes No	Degree Received	G.P.A.	Major
High School					
College					
Business or Trade School					
Other					

Related Skills

I am familiar with the following:

Typing Speed _____ wpm

Shorthand Speed _____ wpm

Dictaphone Speed _____ wpm

Calculator (by touch)

Word Processing _____

PC / Software _____

Other _____

List two professional references (not relatives)

Name: _____

Phone: _____

Address: _____

Relationship: _____

Name: _____

Phone: _____

Address: _____

Relationship: _____

I understand that the employer follows an employment-at-will policy, in that if I am hired, I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law. I understand that this application is not a contract of employment. I understand that to be employed I must be lawfully authorized to work in the United States, and I must have documentation to support my eligibility.

I understand that the company may thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named herein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing such truthful information.

I certify that all statements herein are true and understand that any falsification or willful omission given in my application or interview(s) shall be sufficient cause for dismissal or refusal of employment.

Signature

Date

Office Use Only

Interviewed By: _____

Hired

Not Hired

Comments: _____
