


Employment Application Form

DATE				
Name				
Last First Middle Maiden				
Address				
Number Street City State Zip				
Telephone		Social Security No.:		
Are you 18 years or older?				
			Days/hours available to work	
Position applied for			<input type="radio"/> Full Time	
Salary Desired			<input type="radio"/> Part time	
(Be specific)			<input type="radio"/> Full Time or Part Time	
			Specify Hours/Days Available:	
When available for work?				
Education				
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				
HAVE YOU EVER BEEN CONVICTED OF A CRIME? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. Note: Being convicted of a crime does not necessarily bar applicants from possible employment.				
DO YOU HAVE A DRIVER'S LICENSE? (only necessary if applicable to position applying for)		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have reliable transportation to work?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
State of Issue:(only necessary if applicable to position applying for)				
<input type="checkbox"/> Operator <input type="checkbox"/> Commercial (CDL) <input type="checkbox"/> Chauffeur				
Expiration date:				
				
		- Heartland Clinic, LLC - RSC Illinois, LLC - Valley View Management Co. - Midwest Clinical Research, LLC - Valley View Anesthesia, LLC - Valley Laboratories, LLC		

References

Please list two references other than relatives or previous employers.

Name		Name	
Position		Position	
Company		Company	
Address		Address	
Telephone		Telephone	

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

Work Experience Yes No

Please list your work experience for the **past five years** beginning with your most recent job held.

Employer		Supervisor	Employment dates	Pay or salary (start/final)
Address				
City, State, Zip Code			From	
Phone number			To	
Your last job title				
Reason for leaving (be specific)				

Jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Employer		Supervisor	Employment dates	Pay or salary (start/final)
Address				
City, State, Zip Code			From	
Phone number			To	
Your last job title				
Reason for leaving (be specific)				

Jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Employer		Supervisor	Employment dates		Pay or salary (start/final)
Address			From		
City, State, Zip Code		To			
Phone number					
Your last job title					
Reason for leaving (be specific)					
Jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.					
Employer		Supervisor	Employment dates		Pay or salary (start/final)
Address			From		
City, State, Zip Code		To			
Phone number					
Your last job title					
Reason for leaving (be specific)					
Jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.					
Employer		Supervisor	Employment dates		Pay or salary (start/final)
Address			From		
City, State, Zip Code		To			
Phone number					
Your last job title					
Reason for leaving (be specific)					
Jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.					
May we contact your present employer?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Did you complete this application yourself?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
If not, who did?					

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by this organization (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Chief Executive Officer of the Company. Both the undersigned and the Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

Signature (Note: If filling out electronically, application must be printed out and signed and dated)	
Signature of applicant	
Date	
<p>This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.</p>	