



Family Vision Clinic
Dr. Mike E. Harris Dr. Andrew Ochiltree

job application

Various Federal, State and Local laws prohibit discrimination based on race, color, sex, religion, national origin, ancestry, age, disability or marital status. We are an equal opportunity employer and your response to any question will be judged on its relevance to the position you are seeking.

This form must be filled out completely by the applicant. Please print in ink. Incomplete applications will not be considered.

PERSONAL INFORMATION

today's date:

name (first / middle / last):

social security number:

list any aliases:

home address:

.....

home phone:..... business phone:..... work phone:.....

May we contact you at work? yes no

position applying for:..... date available:

Are you interested in: full-time part-time

If you are under 18 years of age, please state your date of birth:

Do you have a valid driver's license? yes no

Can you perform the duties of the position for which you are applying without accommodation? yes no

comment:

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Why would you like to work for Family Vision Clinic?

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What are your expectations for this position?

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How were you referred to us?

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How long have you lived in Casper?

What is your family situation?

What days and times are you available to work?

Are you willing to work overtime if required? yes no

EDUCATION

TYPE OF SCHOOL	NAME & LOCATION OF SCHOOL	YEAR OF GRADUATION	DEGREE OR DIPLOMA	MAJOR/MINOR
High School:				
College:				
Trade School:				
Other:				

SPECIAL SKILLS

List certifications or licenses held, computer software with which you are familiar and instruments you are qualified to operate:

U.S. MILITARY SERVICE

List branch of service, technical specialization and rank attained:

EMPLOYMENT HISTORY

List employment starting with your most recent position. Do not omit any prior employers.
You may duplicate this page if necessary.

employer:
address:
phone: job title:
immediate supervisor & title:
reason for leaving:
dates employed (from / to) :
starting salary: final salary:

employer:
address:
phone: job title:
immediate supervisor & title:
reason for leaving:
dates employed (from / to) :
starting salary: final salary:

employer:
address:
phone: job title:
immediate supervisor & title:
reason for leaving:
dates employed (from / to) :
starting salary: final salary:

employer:
address:
phone: job title:
immediate supervisor & title:
reason for leaving:
dates employed (from / to) :
starting salary: final salary:

employer:
address:
phone: job title:
immediate supervisor & title:
reason for leaving:
dates employed (from / to) :
starting salary: final salary:

ADDITIONAL INFORMATION

You may list any other information you would like us to consider. That could include professional, trade, business or civil organizations and any offices held. You may list special accomplishments, publications, awards, etc. (Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities or any other similarly protected class.)

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LEGAL

Are you a U.S. citizen or do you have a legal right and necessary documents to work in the U.S. without restriction?

yes no

Were you ever discharged by any company? yes no

If yes, please explain and list company(ies):

Have you ever been convicted of a crime other than a minor traffic violation? yes no

If yes, please explain offense and final disposition:

REFERENCES

name:

relation:

address:

daytime phone:

name:

relation:

address:

daytime phone:

name:

relation:

address:

daytime phone:

APPLICATION STATEMENT

I certify that all information that I have provided is complete, true and correct to the best of my knowledge. I understand that if any information on this application is found to be false, it will be sufficient cause for my application to be rejected or for my dismissal, depending on when it was discovered.

I understand that, if I am hired, I am free to resign at any time. I also understand that the company reserves the right to terminate my employment at any time, with or without prior notice, except as required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration.

I authorize the investigation of any and all statements made in this application, my resumé and interview. This includes, but is not limited to, contacting and obtaining information from references, employers, public agencies, licensing authorities and educational institutions. I hereby wave 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 or organizations for furnishing such information about me.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICATION STATEMENT

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

APPLICANT SIGNATURE: DATE: