APPLICATION FOR EMPLOYMENT - SOUTHWEST EYECARE

This practice is an Equal Opportunity Employer and will not discriminate in the hiring process on the basis of sex, religion, race, color, age, (including pregnancy, sexual orientation, or gender identity), national origin, ancestry, disability, or veteran status.

			PERSONAL INFORMATION						
		email:							
Cell: ()								
employed:									
Yes	No								
			-	_					
n to perform the jo	ob for which		Y	es No					
Yes	No								
? Yes	No								
Position			Relati	onship					
EMPLOYMENT INTEREST									
Wa	age desired:	Da	te available:	:					
Desired days of the week: $M-T-W-Th-Fri$ Full Time 38 - 40 Part Time 15 hrs - 20 hrs - 25 hrs									
Can you work overtime if required: Yes No Can you work Saturday if required? Yes No									
EDUCATION AND TO AIMING									
EDUCA	IION AND I		St. J.	D:4V	Con to Assess				
d Location of Sch	ool	Course of	Study	Graduate?	Grade Average				
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		l							
:									
:									
	Cell: (employed: Yes right to work in tity and legal right n to perform the jet Yes Yes Position EM Wath - Fri No EDUCA	Cell: ()	email:						

EMPLOYMENT HISTORY List la	ast three employers. Begin with	most recent first.	
This section must be completed even if you have attached a res May we contact the employers listed below: If no, indicate which:	ume. Yes No		
Employer:		Employed (state Month and Year): From: To:	
Address:	Phone:	Rate of Pay:	
Email:			
Your Job Title and description of Work:		Reason for Leaving:	
Supervisor's Name:			
		T	
Employer:		Employed (state Month and Year): From: To:	
Address:	Phone:	Rate of Pay:	
Email:			
Your Job Title and description of Work:		Reason for Leaving:	
Supervisor's Name:			
Employer:		Employed (state Month and Year): From: To:	
Address:	Phone:	Rate of Pay:	
Email:			
Your Job Title and description of Work:		Reason for Leaving:	
Supervisor's Name:			
Do you have any commitments to any of these employers that very Yes No If yes, please explain:	would limit your activities with this practice?		
Explain why you feel you are a good candidate for this p	position:		
I certify that the answers given herein are true and complete and requested in this application may remove me from further const facts, whenever discovered, is cause for immediate discharge w statements, and I release all involved parties from any and all li	ideration for employment. Additionally, if employithout notice. I grant permission to use any infor	oyed, any misrepresentation or omission of mation in this application to verify my	
Signature	Date		