Application for Employment

EQUAL OPPORTUNITY EMPLOYER: It is our policy to comply with all applicable federal, state, and local laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, or other protected classification.

ADA Statement: It is our policy to provide "reasonable accommodation" to qualified individuals with disabilities, in accordance with the Americans with Disabilities Act and applicable state and local laws.

What position	on are you	applying for?									
Clinical	al Recepti	onist (Front Desk	(a)	Med	ical Assista	nt 🗖 Ra	diology Te	echnician			
Other	(Indicate):										
Name											
LAST					FIRST MIDDLE						
Address											
STREET					CITY		STATE		ZIP		
Telephone Number					Are you over 18 years old? ☐ Yes ☐ No						
E-mail Address				Social Security Number							
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w nat uniqu	ie quantie	s or skills would	ı you l	oring to	superior C	ngem Care?	w nat are	some or your	suenguis!		
Federal lay	v reauires	s that employers	hire i	only in	dividuals w	ho are autho	rized to b	e lawfully en	nployed in the United		
	-			-					ment authorization. It		
			-		-		-				
	-		cume	nis as	are require	ea by taw to	verijy yo	ur taentijica	tion and employment		
authorizatio	on upon e	mployment.									
Are you authorized to work in the U.S. on an u					ricted basis?		□ Yes □ No				
Have you been told the essential functions of the					or have you	☐ Yes ☐ No					
_		essential functio			J		1,5	3			
Can you perform these essential functions with				ith or w	ithout reaso		□ Yes □ No				
DI ' 1'	4 41 1			4							
	Mon	ours you are ava	Weds			Fri	Sat	Sun	Haliday		
Day	IVIOII	Tues	VV C	us	Thurs	I'II	Sat	Sull	Holiday		
Start:											
Finish:											
	ter: 🗇 Pa	rt-Time 🗖 Full-	I'ime?	,							
Education						T		ı			
Type of School		Name of School		Location		Years Completed		Major & Degree			
High School											
College											
Graduate School											
Bus. or Trade											

Professional