APPLICATION FOR EMPLOYMENT

Cardiology Physicians, P.A. is an equal opportunity employer. Cardiology Physicians, P.A. does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____   Date_____

Address _____

E-mail Address _____

Home Phone # _____   Mobile Phone # _____

Are you eligible to work in the U.S? ___Yes   ___No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.) ___Yes ___No

Have you ever been terminated from employment or asked to resign by an employer? ___Yes ___No

If yes, please provide company name and details _____

Can you work overtime, including weekends? ___Yes ___No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ___Yes ___No

EMPLOYMENT DESIRED

Position desired _____

Date you can start _____   Hourly rate/Salary desired _____

Are you currently employed? _____ If so may we inquire of your present employer? _____

REFERRAL SOURCE

How did you hear about us? Referred by _____ Indeed ___   Other _____

Do you know anyone who works for CPPA? ___Yes ___ No   If yes, who? _____

Have you ever worked for this company before? ___Yes ___No

If Yes, please explain_____

EDUCATION	Name and location of school	Degree Received	Subjects Studied/Major
High School			
College or University			
Technical, Business or Other			

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time.

From	To	Employer Name		Telephone
Job Title		Address		
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities		
Reason for leaving				

From	To	Employer		Telephone
Job Title		Address		
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities		
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Job Title		Address		
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From	To	Employer Name		Telephone
Job Title		Address		
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities		
Reason for leaving				

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

_____

REFERENCES

Please provide professional references, not related to you, whom you have known at least three years.

	Name	Address, Phone, Email	Company	Years Acquainted
1				
2				
3				

Please read carefully before signing:

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Cardiology Physicians, P.A. to hire me. If I am hired, I understand that either Cardiology Physicians, P.A. or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Cardiology Physicians, P.A. has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Cardiology Physicians, P.A. true and complete information on this application. No requested information has been concealed. I authorize Cardiology Physicians, P.A. to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature _____ Date _____