



Employment Application

Position Applied for: _____

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Desired Salary: \$ _____

	Yes	No	
Are you at least 18 years of age?			
Have you ever applied to work here before?			If yes, when?
Have you ever worked here before?			If yes, when?
Do you have a reliable means of transportation?			
Do you have other obligations that might cause you to miss work?			If yes, please explain.
Have you ever been convicted of a crime or plead guilty to a felony?			If yes, please explain.
Are you a U.S. Citizen or an alien who has the legal right to work in the U.S.?			
Do you have any relatives that currently work at NSMC?			If yes, who?
Did anyone refer you to this position?			If yes, who?

License and Registration Information for Nurses and Professional Individuals

State	License Number	Expiration Date	Type

Shift Availability- Check all that you are willing to work

Day	
Evening	
Night	
Weekend	
Holiday	

PRN	
Part-Time	
Full-Time	

Education

High School: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Other: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO
 ☐ ☐

References

*Please list three **professional** references.*

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____