

**WARDS CORNER CHIROPRACTIC**  
**APPLICATION FOR EMPLOYMENT**

Today's Date \_\_\_\_\_ Name \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Best time to contact \_\_\_\_\_ Social Security # Last 4 \_\_\_\_\_

Address \_\_\_\_\_ How Long? \_\_\_\_\_

Previous Address \_\_\_\_\_ How Long? \_\_\_\_\_

Email Address: \_\_\_\_\_

\*\*\*\*\*

How did you hear about our job opening? \_\_\_\_\_

Type of employment desired    ☐ Full Time    ☐ Part Time    ☐ Temporary

Do you have any hour limitations for working? \_\_\_\_\_ If yes, what? \_\_\_\_\_

Are you under a Doctor's care for any condition? \_\_\_\_\_ If so, please list: \_\_\_\_\_

\_\_\_\_\_

Amount of overnight travel acceptable \_\_\_\_\_

Do you have any past experience in the Chiropractic, Medical, Dental or Osteopathic fields? \_\_\_\_\_

If so, please describe \_\_\_\_\_

\_\_\_\_\_

**EDUCATION / SKILLS**

Please circle your highest level of education    12   13   14   15   16+

List any degrees you have obtained \_\_\_\_\_

Skills you have acquired:    ☐ Typing    ☐ Multi-line Telephone    ☐ Computer    ☐ Internet    ☐ Physical Therapy

Do you have any other special skills? \_\_\_\_\_ if so, please describe \_\_\_\_\_

\_\_\_\_\_

**QUALIFICATIONS**

What qualifications, abilities and strong points will help you succeed in this position?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **EMPLOYMENT HISTORY**

Please list your last three employers, starting with your most recent job. *Please complete this area even if you are attaching your resume.*

Employer _____	Dates Employed _____
Salary \$ _____	Phone # _____
Supervisor _____	May we contact? _____
Duties _____	
What did you enjoy most about this position? _____	
What did you enjoy least? _____	
Why did you leave or are choosing to leave this job? _____	

Employer _____	Dates Employed _____
Salary \$ _____	Phone # _____
Supervisor _____	May we contact? _____
Duties _____	
What did you enjoy most about this position? _____	
What did you enjoy least? _____	
Why did you leave this job? _____	

Employer _____	Dates Employed _____
Salary \$ _____	Phone # _____
Supervisor _____	May we contact? _____
Duties _____	
What did you enjoy most about this position? _____	
What did you enjoy least? _____	
Why did you leave this job? _____	

Why do you feel you would be suited for this position?

---

---

---

---

---

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application are grounds for immediate dismissal.

***Date*** \_\_\_\_\_ ***Signature*** \_\_\_\_\_