



**Highlands Oncology Group
APPLICATION FOR EMPLOYMENT**

Prospective employees will receive consideration without discrimination based on race, religion, color, sex, age, national origin, disability, veteran status, sexual orientation, gender identity or any condition prescribed by state or local law.

P E R S O N A L	Last Name	First	Middle	Date
	Street Address			Home Telephone ()
	City, State, Zip			Business Telephone ()
	Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes": Month and Year _____ Location _____			Social Security #
	Position Desired			Pay Expected
	Apart from absence for religious observance, are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If "no", what hours can you work? _____			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you legally eligible for employment in the United States?			When are you available to begin work? _____
	Have you been convicted of any crimes in the past ten years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by a court? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes", describe in full.			Have you ever been bonded? <input type="checkbox"/> Yes <input type="checkbox"/> No If "yes", with what employers?
	Do you have any relatives employed by Highlands Oncology Group?			If "yes", please list name(s)
	Other special training or skills (languages, machine operation, etc.)			

E D U C A T I O N	School	Name and Location of School	Course of Study	No. of years completed	Did you graduate?	Degree or Diploma
	Graduate					
	College					
	Business/ Trade/ Technical					
	High School					
	Elementary					

FOR EMPLOYERS USE ONLY

R E F E R E N C E C H E C K	Employer	Person Contacted	Results
	1		
	2		
	3		
	4		

T E S T R E S U L T S	Test Administered	Pass	Fail	Analysis and Comments

I N T E R V I E W R E S U L T S	Interviewer Name and Comments