



Internal Medicine & Cardiology Center Peace Medical Center

EMPLOYMENT APPLICATION

Internal Medicine & Cardiology Center / Peace Medical Center (IMCC/PMC) is an equal opportunity employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.

PERSONAL

Last Name	First	Middle Initial	Social Security #
Other Name(s) Used			Home Telephone # ()
Address			Other Telephone # ()
Position Applying For	Referred By	Salary Desired	
Have you ever interviewed with IMCC/PMC or its affiliates before?	If yes, list date(s), job title(s), & location(s)		
Have you ever been employed with IMCC/PMC or its affiliates before?	If yes, list date(s), job title(s), & location(s)		
Do you have any relatives employed by IMCC/PMC or its affiliates?	If yes, list date(s), job title(s), & location(s)		
Are you at least 18 years old?	If under 18, do you have a work permit?		

EDUCATION

Circle Highest Grade Completed:	High School	9	10	11	12
	College, Trade, or Business	1	2	3	4
	Graduate Studies	_____			
School	Address	Major Studies	Degree, Diploma, License, or Certificate		
High School					
College/ University					
Vocational, Business, Other					
List Any Professional Designations					
Other Special Knowledge, Skills, or Qualifications					

For Clerical Applicants Only:

Do you type?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, WPM:
Computer Skills (Hardware/Software)			

EMPLOYMENT HISTORY

List your past four employers, starting with the most recent position. All information *must* be completed. You may attach a resume, but not in place of completing the required information.

Employed From / /	Employer Name	Supervisor Name	Starting Salary
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason for Leaving	
Duties & Responsibilities			

Employed From / /	Employer Name	Supervisor Name	Starting Salary
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason for Leaving	
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Employed From / /	Employer Name	Supervisor Name	Starting Salary
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason for Leaving	
Duties & Responsibilities			

GENERAL

- | | | |
|--------------------------|--------------------------|--|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | May we contact your current employer for references? |
| <input type="checkbox"/> | <input type="checkbox"/> | If hired, will you able to work overtime? |
| <input type="checkbox"/> | <input type="checkbox"/> | Will you be able to perform the essential job functions for the position you are applying for with or without reasonable accommodation? |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you ever been convicted of a crime, excluding misdemeanors and summary offenses that has not been annulled, expunged, or sealed by court? |

REFERENCES

Name	Address	Business	Phone Number	Years Known

CERTIFICATION & AUTHORIZATION

The above information is true and correct. I understand that, in the event of my employment by Internal Medicine & cardiology Center/ Peace Medical Centers (IMCC/PMC), I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize IMCC/PMC to inquire into my educational, professional, and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to IMCC/PMC and will hold IMCC/PMC and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information. I further authorize IMCC/PMC to obtain any credit and consumer check.

I understand that nothing in this employment application, the granting of an interview, or my subsequent employment with IMCC/PMC is intended to create an employment contract between myself and IMCC/PMC under which my employment could be terminated only for cause. On the contrary, I understand and agree that, if hired, my employment will be terminable at will and may be terminated by me or IMCC/PMC at any time for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.

If employed, I will be required to provide original documents that verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of Form I-9.

I hereby acknowledge that I have read and agree to the above statements.

Signature

Date