

Date: \_\_\_\_\_

Buffalo Clinic, PA an Equal Opportunity Employer and does not discriminate against any individual in any phase of employment in accordance with requirements of local, state and federal laws.

**PERSONAL INFORMATION**

Name: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Present Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone No: ( ) \_\_\_\_\_ Alternate Phone No: ( ) \_\_\_\_\_

**EMPLOYMENT INFORMATION**

If hired, can you submit verification of your legal right to work in the United States?  YES  NO Initial \_\_\_\_\_

Position Desired \_\_\_\_\_ Second Choice \_\_\_\_\_

Date you can start \_\_\_\_\_ Salary Expectation \_\_\_\_\_

Do you desire:  Full Time  Part Time  On Call  Temporary (specific dates available) \_\_\_\_\_

**Are you willing to work-** Weekends: Yes  No  Holidays: Yes  No  Days: Yes  No  Nights: Yes  No

**EMPLOYMENT EXPERIENCE**

**List names and addresses where you were employed during the last 5 years. Please begin with the most current.**  
**\*\*You must include the complete address including street, city, state, zip code and phone number\*\***

<b>1. Employer</b>		Dates Employed		Work Performed
Address		From	To	
Telephone number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

<b>2. Employer</b>		Dates Employed		Work Performed
Address		From	To	
Telephone number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

<b>3. Employer</b>		Dates Employed		Work Performed
Address		From	To	
Telephone number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

<b>4. Employer</b>		Dates Employed		Work Performed
Address		From	To	
Telephone number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

**EDUCATION**

Type of School Attended	School name and location	Did you graduate YES/ NO	Grade point average	Diploma/ Degree	Major Course of Study
High School: Circle highest grade completed 9 10 11 12					
Technical or Vocational					
College or University					
Graduate School					
Professional Seminars, or Additional Training					

**SPECIAL SKILLS AND QUALIFICATIONS**

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**\* Please note that previous employer information provided may be used and the applicant's prior employers may be contacted to investigate the applicant's background.**

Have you ever been convicted of any felonies?  Yes  No If yes, please be prepared to explain.

**(Conviction of a felony will not automatically disqualify you from employment.)**

“This certifies that the application was completed by me, and that all entries on it and information contained in it are true and complete to the best of my knowledge. I understand that if I am employed, false statements may result in dismissal. I authorize Buffalo Clinic, PA to make an investigation of any of the facts set forth in this application.”

All offers of employment are conditional upon satisfactory reference checks.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date