



2903 W. Britton Rd
 Oklahoma City, OK 73120
 405-755-8028 Ph 405-463-6889 Fx

Date Received: _____

Personal Information			
Last Name	First Name	Middle Name	Today's Date
Street Address	City	State	Zip Code
Home Phone: (____) _____ - _____	Are you a United States Citizen or legally eligible to work in the U. S.? ____ Yes ____ No <i>(if hired, you will be required to provide documentation that you are eligible to work in the U.S.)</i>		
Work Phone: (____) _____ - _____			
Other: (____) _____ - _____			
Are you 18 or over? ____ Yes ____ No			
Title of Position Applying For			Date Available to Work
Have you been previously interviewed or employed by First Choice Urgent Care? ____ Yes ____ No If Yes, list date(s) and job title(s):			
Do you have any relatives currently working for the First Choice Urgent Care? ____ Yes ____ No If Yes, list names and relationship to you:			
Are you employed now?		If so, may we contact your present employer?	

Education					
Name and Location		# Years Completed	Major Area of Study	Degree/Diploma	
High School					
College					
Graduate School					
Technical or Certificate Programs					

Employment History

Please provide the following information for your previous three employers, beginning with the most recent: (Attach additional pages if necessary, Clinician's may reference CV)

Employer:	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

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Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
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Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

Describe your qualifications for the type of employment you are seeking: (Please include skills, special training, etc.)

Please list any special awards, honors, scholarships, or offices held.

References Please list names of supervisors, managers, or others who can comment directly on your abilities:				
Name	Address	Phone #	Relationship/Occupation	Years Known

First Choice Urgent Care is an Equal Opportunity Employer. It is our policy not to discriminate in employment matters on the basis of race, creed, color, age, marital status, national origin, sex, or status with regard to public assistance or disability.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause of dismissal. You are hereby authorized to make investigation of my personal references.

Signature of Applicant

Date