



**DIRECT CARE APPLICANTS ONLY**

Current Clinical Licensure

State: \_\_\_\_\_ License No.: \_\_\_\_\_ Date of Renewal: \_\_\_\_\_

CPR Certified:  Yes Expiration: \_\_\_\_\_  
 No

X-Ray Safety Course?  Yes Date: \_\_\_\_\_  
 No

Memberships/Associations/Affiliations: \_\_\_\_\_

What machines/equipment can you operate that are related to the job for which you are applying? \_\_\_\_\_

Other Skills: \_\_\_\_\_

**SCHEDULED TIME OFF**

Do you have any pre-determined vacation days scheduled or any days that will conflict with regular working hours? If so, what days are in conflict? \_\_\_\_\_

**MILITARY**

Have you ever been in the armed forces?  Yes  No

Are you now a member of the National Guard?  Yes  No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

**WORK EXPERIENCE**

Please list your work experience for the **past five years** beginning with your most *recent* job held including full address and phone details. If you were self-employed, give firm name. **Attach additional sheets if necessary.** Note: A job offer may be contingent upon acceptable references from current and former employers. If currently employed, may we contact your current employer?  Yes  No

Name of Employer Address City, ST Zip Phone Number	Name of last Supervisor	Dates		Pay / Salary
		From	To	Start  Final
Job Title		Reason for leaving (be specific)		

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

**SKILLS**

Please list any skills you have that are appropriate for the position you are applying for:

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\*If application is not completed in its entirety, candidacy will be withdrawn

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**PLEASE READ CAREFULLY**

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**APPLICATION FORM WAIVER** In exchange for the consideration of my job application by Ankle & Foot Centers of Georgia, LLC (hereinafter called “the Company”), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Ankle & Foot Centers of Georgia, LLC, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Administrator of the Company. Both the undersigned and Ankle & Foot Centers of Georgia, LLC may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I further understand that employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

**APPLICANT INFORMATION RELEASE** I hereby authorize any person, educational institution, or company I have listed as a reference on my employment application to disclose in good faith any information they may have regarding my qualifications and fitness for employment. I will hold Ankle & Foot Centers of Georgia, LLC, any former employers, educational institutions, and any other persons giving references free of liability for the exchange of this information and any other reasonable and necessary information incident to the employment process.

*I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.*

**Signature of applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

Ankle & Foot Centers of Georgia, LLC is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, pregnancy, genetic information or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

*Thank you for completing this application form and for your interest in joining our Team.*