



## Lincoln Pediatric Group Employee Application

### Personal Information

1. Full Name:
2. Address:
3. Phone Number:
4. Email Address
5. Referred By:

### Position

1. Position Applied For: \_\_\_\_\_
2. Are you applying for: Full time/Part time/PRN? \_\_\_\_\_
3. Desired Salary: \$ \_\_\_\_\_
4. Date Available to Start: \_\_\_\_\_
5. Are you legally eligible to work in the U.S.? (Yes/No) \_\_\_\_\_
6. Since reaching age 18 have you ever been convicted of a crime? *(Note: You are not required to disclose a sealed criminal record. Convictions will not necessarily bar you from employment, but are reviewed as related to job title.)* (Yes/No) \_\_\_\_\_

If yes, please explain \_\_\_\_\_

### Education

School: Name and Address	Course Of Study	List how many years completed	Did you graduate?	Diploma/Degree
High School				
College				
College				
Business/ Technical/ Professional				

### Professional Licenses/Certifications

Type	State	Expiration	Registration Number

List any special skills you may have or any language (other than English) that you are fluent in?:

\_\_\_\_\_

### Professional Experience

1. Employer: \_\_\_\_\_

- Job Title: \_\_\_\_\_
- Dates Employed: \_\_\_\_\_
- Ending Wage \_\_\_\_\_
- Reason for leaving: \_\_\_\_\_
- Duties and Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

2. Employer: \_\_\_\_\_

- Job Title: \_\_\_\_\_
- Dates Employed: \_\_\_\_\_
- Ending Wage \_\_\_\_\_
- Reason for leaving: \_\_\_\_\_
- Duties and Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

### References

1. Name: Relationship:

- Company
- Email:
- Phone:

2. Name: \_\_\_\_\_

- Relationship: \_\_\_\_\_
- Company: \_\_\_\_\_
- Email: \_\_\_\_\_
- Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_

- Relationship: \_\_\_\_\_
- Company: \_\_\_\_\_
- Email: \_\_\_\_\_
- Phone: \_\_\_\_\_

**Background Check Consent**

- I consent to a background check as part of the hiring process: (Yes/No) \_\_\_\_\_

**Applicant Statement** I certify that all information provided in this application is true and complete. 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:** \_\_\_\_\_ **Date:** \_\_\_\_\_