

USA Employment Application



University Surgical Associates

Exceptional surgeons. Compassionate care.

979 E. Third St., Suite C-300
Chattanooga, TN 37403
P: (423) 267-0466 F: (423) 757-0770

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the human resources department.

Date of Application

General Information

Position Applied For Referral Source

Name (Last, First, Middle) E-mail

Street Address Apt. #

City State Zip Home Phone Cell Phone

May we contact you at work? Yes No

If under 18, can you furnish a work permit? Yes No

Number Best time to call

If no, please explain

Have you been employed at USA before? Yes No

Are you legally eligible for employment in the U.S.? Yes No

If yes, please list dates

Will you travel if required? Yes No

Will you work overtime if required Yes No

Have you been disciplined for breach or inappropriate access of an employer's information management or computer system? Yes No

If no, please explain

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime or felony? Yes No

If yes, please explain

Have you been convicted of a healthcare crime or been excluded from participation in a federally funded healthcare program? Yes No

If yes, please explain

Answering "yes" to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

If necessary, best time to call you at home is? AM PM

Date available to start work Salary range

Type of employment desired? Full-time Part-time Temporary Seasonal Educational Co-op/Internship



Employment History

Please provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent. Please explain any gaps in employment in comment section below. (Use additional sheets if necessary.)

Employer #1 Phone

Supervisor Name, Title May we contact for reference? Yes No

Date Started Employment Date Ended Employment

Starting hourly rate/salary Final hourly rate/salary

Summarize type of work performed and job responsibilities

Reason for leaving position?

Employer #2 Phone

Supervisor Name, Title May we contact for reference? Yes No

Date Started Employment Date Ended Employment

Starting hourly rate/salary Final hourly rate/salary

Summarize type of work performed and job responsibilities

Reason for leaving position?



Employment History continued

Employer #3 Phone

Supervisor Name, Title May we contact for reference? Yes No

Date Started Employment Date Ended Employment

Starting hourly rate/salary Final hourly rate/salary

Summarize type of work performed and job responsibilities

Reason for leaving position?

Employer #4 Phone

Supervisor Name, Title May we contact for reference? Yes No

Date Started Employment Date Ended Employment

Starting hourly rate/salary Final hourly rate/salary

Summarize type of work performed and job responsibilities

Reason for leaving position?



Employment History continued

Employer #5 Phone

Supervisor Name, Title May we contact for reference? Yes No

Date Started Employment Date Ended Employment

Starting hourly rate/salary Final hourly rate/salary

Summarize type of work performed and job responsibilities

Reason for leaving position?

Employment History Comments



Skills and Qualifications

Please summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.



Educational Background

Please provide the following information for the last three schools you attended, starting with most recent.

School/Institution	<input type="text"/>	School/Institution	<input type="text"/>
Degree/Diploma	<input type="text"/>	Degree/Diploma	<input type="text"/>
Years Completed	<input type="text"/> GPA/Rank <input type="text"/>	Years Completed	<input type="text"/> GPA/Rank <input type="text"/>
Major/Minor	<input type="text"/>	Major/Minor	<input type="text"/>

School/Institution	<input type="text"/>	School/Institution	<input type="text"/>
Degree/Diploma	<input type="text"/>	Degree/Diploma	<input type="text"/>
Years Completed	<input type="text"/> GPA/Rank <input type="text"/>	Years Completed	<input type="text"/> GPA/Rank <input type="text"/>
Major/Minor	<input type="text"/>	Major/Minor	<input type="text"/>



References

Please list name and telephone number of three business/work references who are NOT related to you and are NOT previous supervisors. If not applicable, list three school or personal references who are NOT related to you.

Reference Name	<input type="text"/>	Phone	<input type="text"/>	Years Known	<input type="text"/>
Reference Name	<input type="text"/>	Phone	<input type="text"/>	Years Known	<input type="text"/>
Reference Name	<input type="text"/>	Phone	<input type="text"/>	Years Known	<input type="text"/>



Additional Information

Please list professional, trade, business or civic associations and any offices held. Exclude memberships revealing race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status.

Organization

Office Held

Please list special accomplishments, publications, awards, etc. Exclude memberships revealing race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status.



Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employers, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

PLEASE DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

I certify I have read, fully understand and accept all terms of the foregoing Applicant Statement. I also understand that my electronic signature will serve will full authority in place of my hand-written signature.

Applicant Signature

Date



Affirmative Action Voluntary Information

COMPLETION OF INFORMATION BELOW IS VOLUNTARY

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application. In an effort to comply with requirements regarding government record keeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is STRICTLY VOLUNTARY. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is NOT a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

If filling out offline, please print.

Position applied for Date

Referral Source

- Walk-in
 Current/Former Employee
 Government Employment Agency
 Private Employment Agency
 Relative
 School/University
 Other
 USA Web site
 Advertisement

Name of person who referred you (if applicable)



Applicant Information

Name (Last, First, Middle) Home Phone Cell Phone

Street Address Apt. #

City State Zip Male Female

Please check the following Equal Opportunity Identification Group:

- White (not of Hispanic origin)
 Black (not of Hispanic origin)
 Hispanic
 Asian/Pacific Islander
 American Indian/Alaskan Native
 Multiracial (having parents of different races)

ADMINISTRATIVE USE ONLY

Position(s) applied for Available Unavailable

Other positions considered for

Hired Yes No Positioned hired for Date of hire

From the EEO job classifications listed below, which one best describes the position filled?:

- Officials and managers
 Sales workers
 Operatives (semi-skilled)
 Professionals
 Office/clerical workers
 Laborers (unskilled)
 Technicians
 Craft workers (skilled)
 Service workers

Notes

Completed by Date