



SOUTHERN NEW MEXICO
SURGERY CENTER

Application for Employment

Position Desired: 1. _____ 2. _____

Date Available: _____ Salary Required: _____

Name: _____ Social Security Number ____-____-____
print last first middle

Address: _____ City: _____ State: ____ Zip Code: _____

Home Phone: _____ Cellular Phone: _____

How did you learn of this position: _____

Specify Any Hours or Days You Will Not Work: _____

Have You Ever Been Convicted of a Felony: Yes No

If Yes When, Where, and for What? _____

Have You Ever Been Convicted of a DUI, DWI, or Public Intoxication : Yes No

If Yes, Give Dates: _____

Are You Willing to Travel on Business: Yes No

Education:

	High School	College/University	Other
School Name & Location			
Years Attended			
Major Degree			
Other Relevant Training Completed			
Scholastic Honors/Relevant Extra Curricular Activities			

Employment History:

Please list employment for the last 10 years, starting with your current or most recent position.

Complete the first group of questions or attach a resume.

Company	Employed	Position	Reason for leaving
	From (Month/Year)		
Address			
City, State, Zip	To (Month/Year)	Name of Supervisor:	Salary upon Leaving
Phone			

If this is your current employer may we contact them? Yes No

Company	Employed	Position	Reason for leaving
	From (Month/Year)		
Address			
City, State, Zip	To (Month/Year)	Name of Supervisor:	Salary upon Leaving
Phone			

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Address			
City, State, Zip	To (Month/Year)	Name of Supervisor:	Salary upon Leaving
Phone			

Southern New Mexico Surgery Center does not discriminate due to age, race, sex, religion, national origin, and or physical disability.

Please read and sign

I certify that the facts stated on this application are true and complete to the best of my knowledge and that I have withheld nothing that would affect unfavorably upon my application. I understand that if hired, any false statements or omissions on this application could result in my immediate termination. The company is hereby authorized to investigate my employment history, credit report, criminal and driving record, education and references.

I understand that my employment is for no definite period and is "at will" and that the employer/employee relationship can be terminated at any time with or without prior notice.

I acknowledge that I have read and understand the above statements.

Signature: _____ Date: _____