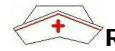
16057 Kamana Road., Suite B Apple Valley, CA \(^92307\) Phone#: 760-946-9191

Phone#: 760-946-9191 Fax#: 760-946-9175



## Reliable Nursing Solutions, Inc When Caring Counts!

## **Employment Application**

Name:			
Last:	First:	Middle:	
Social Security Number	:	Date of Birt	h:
License/Discipline			
All other names you have used in Name(print):			
Dates name(s) last used:			
Permanent Address:			
(where you will receive W-4 if ac	ldress different tha	n above?)	
Street/Apt	City	/State	Zip
TELEPHONE CONTAC	I		
Home # : () Temporary # : () Message # : () E- mail Address :			
<u>PROFILE</u>			I
Referred By:		-	
Date:		_	
Initial:		_	

EDUCATION							
SCHOOL NAME		LOCATION	ON	PROGRAM	YEARS	GRAD	DEGREE
College						Yes	
University						No	
College						Yes	
University						No	
College						Yes	
University						No	
Business						Yes	
Trade/Tech						No	
High						Yes	
School						No	
Language(s) 1 Rea	d, Write and Speak		Pers	onal computer acc	cess: Ye	:S	NO
violence Have yo Are you Is there a Yes  If you Are you a Unite Citizen?  If employed, ca proof?  If no, indicate in HIA	u ever been convicted of a presently or currently out of any reason Reliable Nursin No  u answered Yes to an od States  n you submit  mmigration status.	felony or a crim on bail and/or av ng Solutions Inc.  The above th	TC/TN	nonesty or violence?  The pole to assign you to an attach sperate she  Resident Alien (lis	eet with	Your that you explanate when the second in t	es No es No ou listed?  ation.  attach)
SUPERVISOR MAN		EMPLOYER	POSITION	BUSINESS PHONE			YEARS
							MANAGED
PERSONAL REFER	RENCES:	•	•				·
NAME			RELATIONSHIP	HOME TELEPHONE	Ξ		YEARS\ KNOWN
Health Clearance	(Last Verifiable)		Emergency No	otification			<u> </u>
EMPLOYME	NI HISTORT pleas		s this a travel ass _ist agency		Yes		

Employer Name		_	
Address		City/State	Zip
Position Held	Dept/Floor/Unit	Specialty	Shift Hourly Rate
Name of Supervisor		Pager Number	Telephone
Dates Employed Start Date	End Date	NonTeaching	
		/ Modified Team / Scrub / Circulate / Other	
Charge Experience? Yes EMPLOYMENT HI STORY	No	Is this a travel assignment?	Yes
Employer Name		List agency	
Address		City/State	Zip
Position Held	Dept/Floor/Unit	Specialty	Shift Hourly Rate
Name of Supervisor		Pager NumberWas this facility? TeachingNonTeaching	Telephone
<u>Initial Date</u>			imination in accordance with all
applicable state and federal laws proh ordisability. Any dispute arising from shall be exclusively governed by the I Bernardino. I authorize without reserv limited to background verifications, so all present and previous employers, experience and previous employment. I also und Solutions, Inc. in writing that I wish to undergo drug screening as a condition passes the tests will be hired. If the reconsideration with Reliable Nursing Sto request, in writing, within a reasonabut are not limited to personal intervier past employment, license, and credent dependent upon submitting to and succlearance required before starting empalcohol, drugs or any other substances release Reliable Nursing Solutions, In policies, procedures and standards of governmental requirements to which the be modified from time to time, included pendable performance during the consumption of the subject to change in wages, conditions contractual obligation upon Reliable I with or without cause or notice at my of this document does not constitute a subsequent written statement of Reliable	ibiting discrimination in emploit this document, the application aws of the State of California aws of the State of California aration, Reliable Nursing Solutivarches, certificates, certificates, certificates, certificates, certificates, certificates, the calculational institutions, public articles, to provide all information, INC. from liability, and waiverstand that this authorization. Reaport of the pre-employment of the colutions, Inc. Test results are lable time, the results of Reliabilities, certificates, and investigate cessfully completing, to the sableyment and any required phy that could affect my abilities ic, and any of its Clients any in Reliable Nursing Solutions, Inc. item RELIABLE NURSING sing any drug & alcohol free enontemplated work hours. I under, benefits and operating polici Nursing Solutions, Inc. to contioption or the option of Reliabl nacceptance of employment. A ble Nursing Solutions, Inc. to contioption or the option of Reliable nacceptance of employment. A ble Nursing Solutions, Inc. to for falsification on this applicate or falsification on this applicate.	Prospective employees will receive consideration without discripyment because of race, sex, religion, age, national origin, mar an process, and employment with Reliable Nursing Solutions, In and exclusive jurisdiction and venue for all such matters shall I ons, Inc. to verify and to release any information contained in ons, education, employment validations, immigration, licensur agencies, licensing authorities. Client facilities, personal And or they may have regarding me. I voluntarily and knowingly release all claims, arising from providing or releasing any of this infi is a continuing authorization and will remain valid until such to diable Nursing Solutions, Inc. supports a drug-free workplace. The refuse will not be considered for employment and no guara rug and alcohol tests are positive, the applicant will be disqualikept confidential with RELIABLE NURSING SOLUTIONS, I le Nursing Solutions, Inc. investigation report(s). Examples of orts, motor vehicle driving reports, credit histories, reference choion into theft, fraud, harassment and workplace violence. I untisfaction of both Reliable Nursing Solutions, Inc. and Client I siscal examinations thereafter. This may include special examinations stereafter. This may include special examination form my medical record and medical examination. I c. and client facilities. I will fully comply with any state, feder SOLUTIONS, INC. or Client Facility are subject. These policivironment policies. I understand the position being applied for erstand that if I am employed, my work schedule may include viets. I understand and agree that acceptance of an offer of empleinue to employ me in the future; that my employment and come Nursing Solutions, Inc. This document does not constitute a An employment relationship, which shall at all times be at-will tertify that the information provided in this Application is true, tion is sufficient cause to prevent hiring, or if hired, termination losures, waivers, and representations.	ital status, medical condition nc. (whether potential or actual) nc. (whether potential or interest and medical history. I authorize nother references (as well as all lease each of the above and ormation or from denial or ime as I inform Reliable Nursing Accordingly, applicants may ntee is made that an applicant who fied from employment N.C. and Client. You have the right investigation reports may include necks, verification of education, derstand my employment is reacility, all portions of the health nations that test for the presence of onsent and grant authorization to agree to fully comply with the al, statutory, regulatory or nes, procedures and standards can requires reliable attendance and various shifts, assignments and is oyment does not create a pensation can be terminated at will, n offer for employment and return , can only be created by correct and complete, I understand

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