



Regional Eye Associates

Regional Eye Associates is an equal opportunity employer. Consistent with all applicable state and federal laws, Regional Eye Associates does not discriminate in employment because of sex, age, race, color, religion, national origin, marital status, parenthood status, ancestry, disability, sexual orientation or veteran status.

## EMPLOYMENT APPLICATION

### PERSONAL INFORMATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(First) (Middle) (Last)

Address: \_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Zip code)

Telephone ( ) \_\_\_\_\_ Are you 18 years or older?  Yes  No

Position applying for: \_\_\_\_\_

Location: \_\_\_\_\_ Date available: \_\_\_\_\_

Do you possess a valid current driver's license (only for jobs requiring driving a vehicle)?  Yes  No  
Driver's license number and state: \_\_\_\_\_

Type of position desired:  Full-time  Part-time  Other Will you travel?  Yes  No

Are you related to any current or previous employee of Regional Eye Associates?  Yes  No  
If yes, please name employee: \_\_\_\_\_

Referral source:  Newspaper ad  Employee  Relative  REA website  Other \_\_\_\_\_

To comply with the Immigration Reform and Control Act of 1986, if you are hired, you will be required to provide documents to establish your identity and your authorization to work in the United States. Such documents will be required upon your first work day and within three (3) business days.

Have you ever been convicted of a felony?  Yes  No If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
(Admission of a felony conviction will not necessarily prevent employment. The nature of the conviction will be considered relative to the position for which application is made.)

Have you ever been excluded from a government program or convicted of Medicare or Medicaid fraud?  Yes  No

### EDUCATION RECORD

#### HIGH SCHOOL

Name and Address \_\_\_\_\_

Years completed: \_\_\_\_\_ Major field of study: \_\_\_\_\_ Degree received:  Yes  No

#### COLLEGE/UNIVERSITY

Name and Address \_\_\_\_\_

Degree/Diploma received or expected: \_\_\_\_\_ Major/Minor fields of study: \_\_\_\_\_

Dates attended: \_\_\_\_\_ - \_\_\_\_\_ Did you graduate?  YES  NO  
(from) (to)

**GRADUATE SCHOOL**

Name and Address \_\_\_\_\_

Degree/Diploma received or expected: \_\_\_\_\_ Major/Minor fields of study: \_\_\_\_\_

Dates attended: \_\_\_\_\_ - \_\_\_\_\_ Did you graduate?  YES  NO  
(from) (to)

**OTHER (Business, Technical, etc.)**

Name and Address \_\_\_\_\_

Degree/Diploma received or expected: \_\_\_\_\_ Major/Minor fields of study: \_\_\_\_\_

Dates attended: \_\_\_\_\_ - \_\_\_\_\_ Did you graduate?  YES  NO  
(from) (to)

**COMPUTER SKILLS**

Please summarize computer software and hardware experience

\_\_\_\_\_  
\_\_\_\_\_

**SPECIFIC ABILITIES**

List any special courses taken or skills that directly relate to the job for which you are applying

\_\_\_\_\_  
\_\_\_\_\_

**EXPERIENCE**

**Current or Most Recent Employer**

\_\_\_\_\_ (name) \_\_\_\_\_ (address)

( ) \_\_\_\_\_ May we contact?  YES  NO Supervisor's name: \_\_\_\_\_  
(telephone number)

Start and end dates: \_\_\_\_\_ - \_\_\_\_\_

Primary job responsibilities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Previous Employer**

\_\_\_\_\_ (name) \_\_\_\_\_ (address)

( ) \_\_\_\_\_ May we contact?  YES  NO Supervisor's name: \_\_\_\_\_  
(telephone number)

Start and end dates: \_\_\_\_\_ - \_\_\_\_\_

Primary job responsibilities:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Previous Employer**

\_\_\_\_\_  
(name) (address)

( ) \_\_\_\_\_ May we contact?  YES  NO Supervisor's name: \_\_\_\_\_  
(telephone number)

Start and end dates: \_\_\_\_\_ - \_\_\_\_\_

Primary job responsibilities:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**BUSINESS REFERENCES (Please provide three business references)**

1. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Day Phone: ( ) \_\_\_\_\_

2. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Day Phone: ( ) \_\_\_\_\_

3. Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
Day Phone: ( ) \_\_\_\_\_

**AGREEMENT AND SIGNATURE**

IF I AM HIRED BY REGIONAL EYE ASSOCIATES, I UNDERSTAND AND AGREE TO THE FOLLOWING:

Regional Eye Associates is an at-will employer. Therefore, either Regional Eye Associates or I can terminate my employment at any time with or without cause, and with or without notice.

Each of the answers given by me on this application is, to the best of my knowledge, complete and true. I understand that any material misrepresentation or omission may be cause for dismissal.

I understand that an investigative background inquiry is to be made on myself including, but not limited to, criminal history, driving history, consumer credit history, and other reports. These reports may include information as to my character, work habits, job performance and experience, along with reasons for termination of past employment. I further understand that information will be requested from various Federal, State, and other agencies, which may maintain records concerning my past activities relating to my driving, credit performance, criminal conduct, civil court, and other experiences.

I authorize, without reservation, any party or agency be contacted to furnish the above information. And, I further understand that if offered a position with Regional Eye Associates, to aid in the proper identification of my file and records, I will later be required to provide additional information, (social security number, driver's license number and birth date).

\_\_\_\_\_  
SIGNATURE OF APPLICANT DATE