

**Employment Application**

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for my application being withdrawn and separation from Melanie Massey Physical Therapy, Inc. if I become employed. I give Melanie Massey Physical Therapy, Inc. the right to investigate all references and to secure additional information about me for the purposes of potential employment. I hereby release from liability Melanie Massey Physical Therapy, Inc., any representatives of the company seeking such information and all other persons for furnishing such information needed to obtain employment.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| First Name | Middle Name | Last Name |
| Address - Apt # | City, State, Zip | Date of Birth |
| Home Phone | Cell Phone | SSN |
| Driver’s License Number | Expiration Date of Driver’s License | State of VALID Driver’s License |
| Email Address |  |  |

How did you learn of this position? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tell us why you would like this job and any special qualifications that may increase your chances of employment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been convicted of any violation of law other than minor traffic violations? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Education**

High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ Level of Completion: 1 2 3 4 Date of Graduation \_\_\_\_\_\_\_\_

College \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Level of Completion: 1 2 3 4 Date of Graduation \_\_\_\_\_\_\_\_

Trade School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Level of Completion: 1 2 3 4 Date of Graduation \_\_\_\_\_\_\_\_

Are you currently attending school? \_\_\_\_\_\_\_\_\_\_\_\_ Where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Major \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Employment & References**

|  |  |  |  |
| --- | --- | --- | --- |
| Position applied for: | Desired Salary: | Full Time or Part Time | Date Available |
| Are you employed now: Yes No | | What is your current rate of pay? | |
| Employer | Phone | Manager or Supervisor | May we contact this person for a reference? Yes No |
| Employer | Phone | Manager or Supervisor | May we contact this person for a reference? Yes No |
| Employer | Phone | Manager or Supervisor | May we contact this person for a reference? Yes No |
| Employer | Phone | Manager or Supervisor | May we contact this person for a reference? Yes No |

**Work History – Begin with the most recent**

|  |  |  |  |
| --- | --- | --- | --- |
| Begin – End Date of Work | Business Name | Position | Salary |
| Supervisors Name: | | Responsibilities | |
| Reason for Leaving: | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Begin – End Date of Work | Business Name | Position | Salary |
| Supervisors Name: | | Responsibilities | |
| Reason for Leaving: | | | |

|  |  |  |  |
| --- | --- | --- | --- |
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|  |  |  |  |
| --- | --- | --- | --- |
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| Supervisors Name: | | Responsibilities | |
| Reason for Leaving: | | | |

**Office Abilities: Please check yes or no based on your experience**

|  |  |  |
| --- | --- | --- |
| Yes | No | Description |
|  |  | Answer multi-line phone |
|  |  | Record keeping for patients/clients |
|  |  | Greeting patients and addressing concerns |
|  |  | Keeping accurate account of money (ex: balancing monies at the close of day) |
|  |  | Appointment scheduling |
|  |  | Computer entry for medical records |
|  |  | Basic computer skills: typing, Microsoft Word, Microsoft Excel, calculator, etc. Please list what programs you have worked with? |
|  |  | Able to multi-task |

**Therapy Tech Abilities: Please check yes or no based on your experience**

|  |  |  |
| --- | --- | --- |
| Yes | No | Description |
|  |  | Are you willing to clean spills and soils (i.e.; urine, fecal matter, vomit, change a diaper) |
|  |  | Are you willing to clean and sanitize rooms (therapy, bathroom, kitchen, waiting room), therapy supplies and linens |
|  |  | Knowledge on therapeutic exercises or stretches |
|  |  | Knowledge on modalities: ultrasound, e-stim, ice massage, etc. |
|  |  | Knowledge on transferring a patient from a wheelchair to a car/mat |
|  |  | Able to interact and cope with disabled children and adults |
|  |  | Able to accurately and effectively report on a patient’s performance to the supervising therapist |
|  |  | Able to multi-task |