



License Nurse Practitioner Application

APPLICATION FOR EMPLOYMENT
An Equal Opportunity Employer

Date _____

Last name _____ First name _____ M.I. _____

SS # _____ Maiden name _____

Qualification: FNP ANP GNP Other _____

Type / License # _____ Issued by State of _____ Exp. Date _____

Address _____ Phone _____

City _____ State _____ Zip _____

Home phone _____ Cell phone _____

Email address _____ Message phone _____

Do you have the ability to travel from home to home? Yes No

Do you have access to a car? Yes No

Do you have a valid driver's license? Yes No

Have you ever been convicted of a crime other than a minor traffic offense? Yes No

If yes, explain: _____

Have you ever been terminated from employment or asked to resign by an employer? Yes No

If yes, please provide company names and details: _____

Have you ever been employed by any division of Home Care by Black Stone before? Yes No

If yes please explain: _____

How were you referred to House Calls by Black Stone?

Newspaper (name) _____

Web Site (name) _____

Friend (name) _____

Postcard Other _____

Please list any languages in which you are fluent: _____

What days/hours are you available to work?

Are you available to work weekends? Yes No

Hrs Available. Mon to Tues to Wed to Thurs to Fri to Sat to Sun to

Education

High School

College

Other

School Name _____

School City, State _____

Graduated Yes No

Yes No

Yes No

Degree or major _____

Check areas in which you have experience or training:

Skills Inventory A

- Head Nurse
- Home Care
- Staff Relief
- Private Duty
- Hospital
- Nursing Home
- Geriatrics
- Pediatrics

- OB/GYN
- Pediatric Care
- Med-Surge
- AIDS Care
- IC/CUU
- IV Therapy
- Oncology
- Other _____

Skills Inventory B

- IV
- IM
- PICC Line
- Heparin Lock
- Subclavian
- Z - Track
- Intradermal
- Subcutaneous

- Teaching Clients
- Dressings
- Catheterizations M/F
- Wound Vac
- Cardiac Monitor
- ACLS
- CPR
- Other _____

EMPLOYMENT HISTORY Include your last five (5) employers, both permanent and temporary

1. From _____ Employer Name _____ Pay Rate _____

To _____ Position _____ Supervisor _____

Reason for Leaving _____

2. From _____ Employer Name _____ Pay Rate _____

To _____ Position _____ Supervisor _____

Reason for Leaving _____

3. From _____ Employer Name _____ Pay Rate _____

To _____ Position _____ Supervisor _____

Reason for Leaving _____

4. From _____ Employer Name _____ Pay Rate _____

To _____ Position _____ Supervisor _____

Reason for Leaving _____

5. From _____ Employer Name _____ Pay Rate _____

To _____ Position _____ Supervisor _____

Reason for Leaving _____

PERSONAL REFERENCES (no family members please)

1. Name _____ Phone _____
Address _____
Occupation _____ Relationship _____ # of years known _____
2. Name _____ Phone _____
Address _____
Occupation _____ Relationship _____ # of years known _____
3. Name _____ Phone _____
Address _____
Occupation _____ Relationship _____ # of years known _____

- I certify that the answers given herein are true and complete to the best of my knowledge.
- I understand that, in the event of employment, false or misleading information given in my application or interview may result in discharge.
- I authorize investigations of all references and statements contained in the application for employment as may be necessary in arriving at an employment decision.
- I understand that if I am offered employment, I will be working for House Calls by Black Stone, on its payrolls, at its clients' premises.
- I understand that my employment may be terminated by House Calls by Black Stone at any time, without liability to me for wages and salary except as have been earned by me at the date of such termination.

Signature: _____ Date _____