

Application for Employment

General Information

First Name:	Last Name:	Middle Name:
Email Address:	Home Phone:	Mobile Phone:
Street Address:		City:
State:	Zip:	Country:
Discipline:	If other, please specify:	
Primary Specialty:	Secondary Specialty:	If other, please specify:
Years of experience in your current discipline:		Have you ever worked as a traveler? Yes No

Education

Name of School/University:		Graduation Date (mm/yyyy):
Degree:	Major:	
Name of School/University:		Graduation Date (mm/yyyy):
Degree:	Major:	
Please list any additional relevant education or training:		

Licenses and Certifications

License Type:

License Number:

Date of Issue (mm/dd/yyyy):

State:

Expiration Date (mm/dd/yyyy):

Please select all applicable certifications and enter the respective expiration date:

ACLS

PALS

BLS

RNC

CNOR

Please list any additional licenses or certifications you hold and their respective expiration dates:

Have you ever had your license or certification, in any state, investigated, suspended, revoked or had disciplinary action taken against it?

Yes

No

If yes, please provide details and current status:

Additional Information

What date are you available to begin employment?

What is your geographic preference?

What is your shift preference?

How did you learn about Worldwide Travel Staffing, Limited?

Have you already spoken with a Worldwide recruiter?

If so, whom have you spoken with?

Yes

No

Name of Emergency Contact:

Emergency Contact Phone:

Employment History

Employer Name:	From (mm/dd/yyyy):	To (mm/dd/yyyy):
Street Address:		City:
State:	Zip:	Was this a travel assignment? Yes No
Reason for leaving:		
Position Held:	Discipline:	If other, please specify:
Unit/ Floor / Department:	Specialty:	If other, please specify:
Supervisor's Name:	Supervisor's Title:	Supervisor's Phone:
Employer Name:	From (mm/dd/yyyy):	To (mm/dd/yyyy):
Street Address:		City:
State:	Zip:	Was this a travel assignment? Yes No
Reason for leaving:		
Position Held:	Discipline:	If other, please specify:
Unit/ Floor / Department:	Specialty:	If other, please specify:
Supervisor's Name:	Supervisor's Title:	Supervisor's Phone:

Employment History

Employer Name:	From (mm/dd/yyyy):	To (mm/dd/yyyy):
Street Address:		City:
State:	Zip:	Was this a travel assignment? Yes No
Reason for leaving:		
Position Held:	Discipline:	If other, please specify:
Unit/ Floor / Department:	Specialty:	If other, please specify:
Supervisor's Name:	Supervisor's Title:	Supervisor's Phone:

Employer Name:	From (mm/dd/yyyy):	To (mm/dd/yyyy):
Street Address:		City:
State:	Zip:	Was this a travel assignment? Yes No
Reason for leaving:		
Position Held:	Discipline:	If other, please specify:
Unit/ Floor / Department:	Specialty:	If other, please specify:
Supervisor's Name:	Supervisor's Title:	Supervisor's Phone:

References

Reference Name:

Reference Phone:

Reference Name:

Reference Phone:

Reference Name:

Reference Phone:

CONSENT AGREEMENT – Please read carefully

I am applying for employment with a Worldwide Travel Staffing, Limited (“Worldwide”). I affirm that all of the information contained in this application is true and complete, and I understand that any falsification, misrepresentation or omission may result in refusal of employment, withdrawal of an offer of employment, or immediate dismissal from employment.

I understand that if I am hired by Worldwide, that I will be an at-will employee during the extent of my employment, which means that either I or Worldwide can terminate my employment with or without cause and with or without prior notice. I understand that no one other than Worldwide’s top human resources officer has the authority to alter my employment status.

I understand that, as a condition of employment, I will be required to provide proof of employment eligibility.

If I am applying for a position that requires a license, registration and/or certification, I understand that any offer of employment made by Worldwide is expressly conditioned upon my providing proof satisfactory to Worldwide that I have a current license, registration and/or certification of the kind required. I understand that if Worldwide is not able to verify my license, registration and/or certification to its satisfaction, my job offer may be rescinded or my employment terminated.

I understand that any offer of employment made by Worldwide is also expressly conditioned upon Worldwide’s confirmation that I am not currently excluded from participation as a supplier or provider under any federal or state health care program and am not currently under investigation or facing charges which could lead to my exclusion from participation in any such program. I understand that if Worldwide is not able to verify these things to its satisfaction, Worldwide may rescind any job offer or terminate my employment.

I understand that any offer of employment made by Worldwide is expressly conditioned upon Worldwide’s investigation of my background. In conducting any background checks Worldwide will comply with the Fair Credit Reporting Act.

I understand that any offer of employment made by Worldwide is also expressly conditioned upon my submission to a drug test. If I refuse to consent to or cooperate in the conduct of such a test, or if I test positive for a controlled substance, I understand that Worldwide may rescind any job offer or terminate my employment.

I agree to submit to post offer physical examination as permitted by law.

I agree that I will be bound by and will adhere to any other rules and policies issued by Worldwide, including the policy manual, all other published rules, procedures and guidelines.