



NORTH PLATTE

Surgery Center

EMPLOYMENT APPLICATION

Personal Information

Full Name:

Phone Number:

Email Address:

Current Address:

Position Information

Position Applying For:

Employment Preference:

☐ Full-Time ☐ Part-Time ☐ PRN

When are you available to begin work?

Employment History

Current or Most Recent Employer:

Job Title:

Dates Employed:

Brief Description of Duties:

Reason for Leaving:

Why are you interested in working at North Platte Surgery Center?:

Is there anything else you'd like us to know?:

☐ I certify that the information provided is true and accurate to the best of my knowledge.

Electronic Signature:

Date:

Education

Highest Level of Education

- ☐ High School Diploma/GED
☐ Technical School
☐ Associate Degree
☐ Bachelor's Degree
☐ Master's Degree
☐ Doctorate
☐ Other

Professional Licenses or Certifications:
(Example: RN, LPN, CST, CPR, ACLS, BLS, etc.)

Work Eligibility

Are you legally authorized to work in the United States?

☐ Yes ☐ No

Are you at least 18 years of age?

☐ Yes ☐ No

Include Any Applicable In Submission:

- ☐ Resume
☐ Driver's License
☐ Professional License
☐ Certifications

After completing the application, submit the completed form and any required supporting documents here



Submit Here