

Employment Application

Today's Date _____

Last Name _____ First Name _____ Middle Initial _____

Current Street Address/Apt _____

City _____ State _____ Zip _____ Phone # _____

Email Address _____

Position Your Applying for _____ How did you hear of this opening? _____

What date are you able to start _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation)

Yes No

Are you looking for full-time employment?

Yes No

If no, what hours are you available? _____

Do you have experience in blood draws?

Yes No

If yes, how many months or years of experience do you have? _____

Are you willing to work a swing shift?

Yes No

Are you willing to work evenings and weekends?

Yes No

Have you ever been convicted of a felony? (This will not necessarily affect your chances of obtaining a position)

Yes No

If yes, please describe conditions: _____

TestPoint Medical

2221 West Russell Street
Sioux Falls, SD 57104

☎ 877-354-4154

☎ (fax) 866-562-0301

✉ info@testpointmedical.com

🌐 www.testpointmedical.com

Note: Please attach your résumé as a separate document.

Thank you for your interest in a position with TestPoint Medical.