

**Bonnie L. Bateman, DDS and Gerald Ganz, DDS, APC, dba,
Los Altos Dental**

Employment Application

Position(s) applied for _____ Date of Application ____/____/____
Name _____ Email Address _____
Address _____ Telephone _____
City, State Zip _____ Cell Phone _____

Are you legally eligible for employment in the U.S.: Yes:___ No:___ (Proof of identity and U.S. citizenship or immigration status will be required upon employment.)

Have you ever been employed by the Practice before: Yes ___ No ___ If yes, please provide dates, position held, and reason for leaving: _____

Have you ever been convicted of a felony? Do not include information regarding a juvenile conviction, a marijuana conviction that is more than two years old, or convictions that have been expunged. Yes___ No ___ (A conviction may be relevant if job-related, but does not necessarily bar you from employment).

If yes, conviction date: _____ Explanation: _____

If offered a job and are under 18 years of age, can you furnish a work permit: Yes ___ No ___

Driver's license number, if position applied for requires driving _____ State _____
Class _____

Date available to start work ____/____/____ I am available to work: Full-time:____ Part-time:____ Temp: _____

EDUCATIONAL BACKGROUND:

High School name and location: _____ Did you graduate?

College name and location:

Major / Degree Achieved

Other Educational Institution(s):

Other Degree / Certification Achieved _____

SKILLS AND QUALIFICATIONS: Summarize special skills and qualifications acquired from employment, membership in professional organizations or other experiences that may qualify you for work with the Practice. Exclude those that indicate race, color, religion, gender, gender identity, national origin, ancestry, age, physical or mental disability, medical condition, sexual orientation or marital status.

REFERENCES:

Name and phone number: _____