

**Daniel M. Allen, DDS, MS, PC**  
Employment Application



**APPLICANT INFORMATION**

DATE \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Maiden

Address \_\_\_\_\_  
Number Street City State Zip

Telephone ( ) \_\_\_\_\_ E-mail address: \_\_\_\_\_

Position Applied for: \_\_\_\_\_ Date Available: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Days Available: M T W T H F Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Are you able to perform the essential functions of the position with or without accommodations? \_\_\_\_\_

Are you a citizen of the United States? Yes/No If not, are you authorized to work in the U.S.? Yes/No

Have you ever worked for this company? Yes/No If so, when? \_\_\_\_\_

Have you ever been convicted of a felony? Yes/No If yes, explain: \_\_\_\_\_

Provide a valid driver's license #: \_\_\_\_\_

**EDUCATION**

TYPE OF SCHOOL	NAME OF SCHOOL	ADDRESS	YEARS COMPLETED	DIPLOMA/DEGREE
High School				
Trade School				
College				

**REFERENCES**  
*Please list three professional references*

Full Name:	Relationship:
Company:	Phone:
Address:	City, State, Zip
Full Name:	Relationship:
Company:	Phone:
Address:	City, State, Zip
Full Name:	Relationship:
Company:	Phone:
Address:	City, State, Zip

**PREVIOUS EMPLOYMENT**

Company:	Supervisor:	Phone:
Address:		
Job Title:	Starting Salary: \$	Ending Salary: \$
<b>Responsibilities:</b>		

Company:	Supervisor:	Phone:
Address:		
Job Title:	Starting Salary: \$	Ending Salary: \$
<b>Responsibilities:</b>		

Company:	Supervisor:	Phone:
Address:		
Job Title:	Starting Salary: \$	Ending Salary: \$
<b>Responsibilities:</b>		

**MILITARY SERVICE**

Branch:	From:	To:
Rank at Discharge:	Type of Discharge:	
If other than honorable, explain:		

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.	
I grant permission to Allen Orthodontics to perform a background check on me.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date: