



St. Johnsbury Dental Associates

1 Place Notre Dame, St. Johnsbury VT 05819

Phone: 802-748-9357 Fax: 802-748-8770

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

| | | | |
|------------|--|---------------|--|
| Company: | | Phone: | |
| Address: | | | |
| Full Name: | | Relationship: | |
| Company: | | Phone: | |
| Address: | | | |
| Full Name: | | Relationship: | |
| Company: | | Phone: | |
| Address: | | | |

Previous Employment

Company: _____ Phone: _____
 Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?

| | | |
|--|---------------------------------|--------------------------------|
| | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|--|---------------------------------|--------------------------------|

Company: _____ Phone: _____
 Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?

| | | |
|--|---------------------------------|--------------------------------|
| | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
|--|---------------------------------|--------------------------------|

Company: _____ Phone: _____
 Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

St. Johnsbury Dental Associates is an equal opportunity employer and does not discriminate against applicants or employees on the basis of gender, race, color, religion, creed, national origin, ancestry, age, disability, marital or veteran status, or any other legally protected status.