



403 East 11th Street
 Panama City, FL 32401
 Tel: 850-747-5599
 Email: HR@pancarefl.org

We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status without regard to race, color, religion, creed, sex, gender, marital status, national origin, age, physical or mental disability.

Name _____ Date of application _____
Last First Middle
 Address _____ City _____ State _____ Zip _____
 Telephone _____ Email Address _____

1. GENERAL INFORMATION:

Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodations? YES NO
 Have you been convicted of any felonies other than minor traffic violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying.) No Yes
 If yes, explain: _____

2. EDUCATION & TRAINING:

Check last grade completed- Grade 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Masters ___ Doctorate ___

Name of Last School Attended:	Major Course Studied	Graduated or Degree (Y or N)

3. SKILLS Please list any skills you have that are appropriate for the position you are applying for:

If required, will you work?

Rotating shifts YES NO
 Overtime YES NO

Saturdays YES NO
 Sundays YES NO

Position applying for, be specific:

Salary Requirement per hour
 \$ per year

State fully why you believe you are qualified for this position:

Date you can start: _____

EMPLOYMENT HISTORY

Starting with your PRESENT or MOST RECENT EMPLOYER list in consecutive order ALL EMPLOYMENT for at least the past THREE employers. If currently employed, may we contact your employer? Yes No

PRESENT OR MOST RECENT EMPLOYER

FULL NAME OF COMPANY (AREA CODE) TELEPHONE				SALARY BEGIN/END	EMPLOYED FROM TO MO/YR MO/YR
STREET ADDRESS CITY STATE ZIP					
NAME & TITLE OF SUPERVISOR		TITLE OF YOUR POSITION		REASON FOR LEAVING:	
LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY:					
FULL NAME OF COMPANY (AREA CODE) TELEPHONE				SALARY BEGIN/END	EMPLOYED FROM TO MO/YR MO/YR
STREET ADDRESS CITY STATE ZIP					
NAME & TITLE OF SUPERVISOR		TITLE OF YOUR POSITION		REASON FOR LEAVING:	
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STREET ADDRESS CITY STATE ZIP					
NAME & TITLE OF SUPERVISOR		TITLE OF YOUR POSITION		REASON FOR LEAVING:	
LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY:					

READ CAREFULLY:

By submitting this application and electronically signing the Dispute Resolution Agreement that accompanies this application, I understand that I agree to resolve any and all claims, disputed or controversies arising out of or relating to my application and possible employment with PanCare of Florida, Inc. exclusively by binding arbitration to be administered by the American Arbitration Association (the "AAA") pursuant to its rules that are applicable to employment disputes.

I certify that the information contained in this application is correct to the best of my knowledge and understanding that any misstatement or omission of information may result in denial of employment or discharge. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

Signature _____ Date _____