

CORNERSTONE IMAGING MANAGEMENT, LLC

1705 Renaissance Blvd., #100
Edmond, OK 73013
405.285.7500 • Fax 405.285-7501

AN EQUAL OPPORTUNITY EMPLOYER

Employment Application

Please Print in Ink

PERSONAL					Date			
Last Name		First		Middle		Social Security Number		
Present Address (Street, City, State, Zip)					Area Code & Home Phone			
Are you over 17 years of age?			E-mail:		Other Phone			
For what position are you applying?								
Salary/Wage Expected				Are you willing to work full time or part time? Specify days and hours if you desire part-time employment:				
State any days of the week or hours of the day you are not willing to work:								
Date you would be available to report to work:								
Have you filed an application or been employed here before?					Dates			
EDUCATION								
SCHOOL	SCHOOL NAME AND LOCATION	COURSE OF STUDY	LAST YEAR COMPLETED				GRADUATE	DEGREE
HIGH SCHOOL			1	2	3	4	YES <input type="checkbox"/>	
							NO <input type="checkbox"/>	
COLLEGE/ UNIVERSITY			1	2	3	4	YES <input type="checkbox"/>	
							NO <input type="checkbox"/>	
OTHER (SPECIFY)			1	2	3	4	YES <input type="checkbox"/>	
							NO <input type="checkbox"/>	
List any scholastic organizations to which you belonged, and any special projects or achievements:								

EMPLOYMENT

Respond fully to all areas and provide full details for reasons for leaving previous employers. Failure to respond fully may cause your application to be rejected.

Present or Last Employer's Name		Date Employed (Month & Year) FROM TO	
Nature of Business		Salary Starting Ending	
Address (Street)	(City, State, Zip)	Area Code & Phone	
		\$ Per	\$ Per
Name & Title of Supervisor		May we contact?	
Your Position Title		Reason for leaving:	
Special Skills, Knowledge or Experience Acquired:			
Preceding Employer's Name		Date Employed (Month & Year) FROM TO	
Nature of Business		Salary Starting Ending	
Address (Street)	(City, State, Zip)	Area Code & Phone	
		\$ Per	\$ Per
Name & Title of Supervisor		May we contact?	
Your Position Title		Reason for leaving:	
Special Skills, Knowledge or Experience Acquired:			
Preceding Employer's Name		Date Employed (Month & Year) FROM TO	
Nature of Business		Salary Starting Ending	
Address (Street)	(City, State, Zip)	Area Code & Phone	
		\$ Per	\$ Per
Name & Title of Supervisor		May we contact?	
Your Position Title		Reason for leaving:	
Special Skills, Knowledge or Experience Acquired:			
Preceding Employer's Name		Date Employed (Month & Year) FROM TO	
Nature of Business		Salary Starting Ending	
Address (Street)	(City, State, Zip)	Area Code & Phone	
		\$ Per	\$ Per
Name & Title of Supervisor		May we contact?	
Your Position Title		Reason for leaving:	
Special Skills, Knowledge or Experience Acquired:			
Preceding Employer's Name		Date Employed (Month & Year) FROM TO	
Nature of Business		Salary Starting Ending	
Address (Street)	(City, State, Zip)	Area Code & Phone	
		\$ Per	\$ Per
Name & Title of Supervisor		May we contact?	
Your Position Title		Reason for leaving:	
Special Skills, Knowledge or Experience Acquired:			

GENERAL

Are you known to schools, employers or references by any other name? If yes, what name(s)?

List any Professional, Business or Trade Organizations of which you are a member?

If hired, can you produce proof of identity and legal authorization to work in the U.S.?

Have you been convicted of a felony or released from prison within the last 10 years? If yes, details and dates:

Licensure

State(s)

License Number(s)

Additional Certifications:

Business References

NOTE: References may be different from supervisors at your various employers.

Name	Occupation	
Address	Area Code & Phone	
Name	Occupation	
Address	Area Code & Phone	
Name	Occupation	
Address	Area Code & Phone	

Please read carefully before signing.

I understand that completion of this application does not guarantee that there are any positions open and does not in any way obligate **Cornerstone Imaging Management** to hire me or offer me a job.

In accordance with the laws of this state, your employment with Cornerstone Imaging Management is at will. This is not a contract of employment nor should it be construed as an employment agreement.

Cornerstone Imaging Management is an equal opportunity employer, and selects individuals best matched for the job based upon job-related qualifications regardless of race, color, creed, sex, religion, national origin, age or disability. In the processing of your employment application, we may obtain references from former employers. Permission is hereby granted to any school, person, firm or corporation, whether my former employer or otherwise to give **Cornerstone Imaging Management** any relevant information that may be required to arrive at an employment decision, and I hereby release **Cornerstone Imaging Management**, its officers, employees, representatives or agents, from any and all liability and/or damage incurred by me in obtaining such information.

Cornerstone Imaging Management reserves the right to use any method of investigation which, in its sole discretion, it deems reasonable and necessary to determine whether any employee has engaged in conduct warranting disciplinary action. As a condition of continued employment if hired, I agree to cooperate in any such investigation. I understand the **Cornerstone Imaging Management**, may require prospective employees to take a post-offer pre-employment medical examination, drug screen test and criminal background check. As a condition of my employment, I voluntarily agree to cooperation in submitting to any urine or blood tests requested by **Cornerstone Imaging Management** to determine the presence of drugs in my system.

I understand that if hired, my continued employment is predicated upon the truthfulness and accuracy of the statements contained herein. If hired, I agree to conform to the rules and regulations of **Cornerstone Imaging Management** as issued from time to time.

Date

Signature

Cornerstone Imaging Management would like to know more about your career objectives. Please discuss your short-term and long-term goals, your strengths and weaknesses and anything else you wish to include.



Please email your filled out application, resume, credentials, and list of references to the email listed below. We thank you for your interest in working with Vantage Diagnostic Imaging.

Email: Aprila@vantagediagnostic.com

Subject: Hefner Evening Technologist