2608 Old Fair Rd. Grand Island, NE 68803

## Internship Application

, NE 68822					_		
8) 872-5040	Full Name	Date	of Birth	Social Security	Num		
ve., Ste #5	Address		(	City/State/Zip			
ney, NE 68845	( ) -	( )					
) 455-1560	Home Phone Number	Cell Number	A	Alternate Number			
	E-mail address						
	☐ I am a U.S. citizen or per	☐ I am a U.S. citizen or permanent resident alien and have a legal right to work in the United States.					
	Where you were born?						
		lity	County	State			
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	and background checks pleas	the Nebraska Adult and Ch se answer the following qu names including maiden na	ald Abuse and Neg estions. mes, married name	glect Registry. For the cr	rimin		
	and background checks please Please indicate all previous n	the Nebraska Adult and Ch se answer the following qu names including maiden na	ald Abuse and Neg estions. mes, married name	glect Registry. For the cr	rimin		
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In case of an er	nergency ple	ase contact:					
at							
I am available t change I will no	otily the appi	opriate peo	ple so I can b	and that in the	event that my cordingly.	y available ho	ours will
	Mon.	Tues	Weds	Thurs.	Fri.	Sat.	Sun.
Earliest Time  Latest Time							
Undergraduate	Education:						
College or Univ	ersity:			Location:			
Address:				Document.			
Dates of Enrolln	nent:			Degree:			
Date of Graduati	ion:/ mo yr.	_ to/ mo yr.	_				
Graduate Educ	ation:						
College or Unive	ersity:			Location:			
Address							
– Dates of Enrollm							
Date of Graduation	on:/ mo yr.	to/ mo yr.	_				
Professional Me	mberships						
List all membersh	-	ssional organ	nization/socie	eties/academic:			
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Licenses/Registration		Original	
State Type	License Number	Issue Date	Expiration Date
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Previous Employment:			
Company:		Dates Employed:	
Position:			
Supervisor:			
Reason for leaving:			
May be contact this employe			
Company:		Dates Employed:	
Position:			
Supervisor:			
Reason for leaving:			
May be contact this employe	r? ☐ Yes ☐ No	L PROPERTY.	
	100		
Company:		Dates Employed:	
Company:			
Company: Position: upervisor:		Previous Salary:	

May be contact this employer?  Yes No
Please answer the following questions. They are not designed to trick you but to aid in highlighting your abilities such as being detail-oriented, compassionate etc. Please answer honestly and to the best of your ability.
I am eager to work with the following types of clients?
While working at your last job, tell me about your most frustrating experience and how you handled it?
If we were to ask your previous supervisor, what would they say about your attendance and job performance?
Wholeness Healing Center's philosophy is that healing begins at the door, what does this mean to you and how do you think you can participate in this mission? How would this philosophy extend to in-home contact with clients?
What is the difference between neatness and orderliness? Which, in your opinion, which is more important?
The word river can be spelled by using five letters from the word university?   True False
What did you enjoy most about your last job? Enjoy least?

Describe some things in your work life or personal life that you have been most excited about
Just as we are working toward finding an appropriate applicant for our job opening, it is important that we are a good fit for you. Please tell us some important qualities for you to have in an employer/job
Please provide a copy of your driver's license, your birth certificate and copies of undergraduate diplomas.
I agree while during training/employment with Wholeness Healing Center to be confidential, ethical and work within the H.I.P.A.A. guidelines. I understand that if ethics are violated, I am subject to questioning. In the event that ethics are determined violated I understand that this may result in grounds for disciplinary action or dismissal from the application process or employment.
I agree to remain drug free throughout my application process/employment with Wholeness Healing Center, PC. I understand that I may be submitted to random drug testing. My refusal to complete this requirement or my positive test result will terminate my employment. The testing procedure will be conducted by an independent laboratory chosen by Wholeness Healing Center PC and be paid for by Wholeness Healing Center PC.
acknowledge that the information I have furnished is correct to the best of my knowledge and understand hat falsification of this information could be grounds for disciplinary action or dismissal from the application process or employment.
am agreeing to the required history and criminal background checks by completing this application.
Signature Data