

WHOLENESS HEALING CENTER

"Heart Centered Wellness For Life"

Therapist Application

Please complete the following application to be considered as an outpatient mental health therapist, or counseling intern. Upon completion, submit to the director at: janiepw@wholenesshealing.com or fax to 308.382.5315. Please attach a current resume. An interview will be conducted after application is reviewed and approved.

Full Name	Date of Birth	Social Security Number
Address	City/State/Zip	
() - () - ()	() - ()	() - ()
Home Phone Number	Cell Number	Alternate Number

E-mail address

I am a U.S. citizen or permanent resident alien and have a legal right to work in the United States.

Please check **all** that apply: (we are interested in a wide variety of candidates):

I am applying for the following position:

Outpatient Mental Health Therapist Counseling Intern

I am flexible with the hours I can work _____

I am interested in seeing clients in the following settings: Remotely (Telehealth) Office (in person)

If office setting, at which locations in Nebraska: Grand Island Kearney Broken Bow Ord

I am available to work within the following hours:

	Mon.	Tues	Weds	Thurs.	Fri.	Sat.	Sun.
Earliest Time							
Latest Time							

Available Start Date: _____

Undergraduate Education:

College or University: _____ Location: _____

Address: _____

Dates of Enrollment: _____ Degree: _____

Date of Graduation: ___/___/___ to ___/___/___
mo yr. mo yr.

Specific Training/Workshops/Honors: _____

Graduate Education:

College or University: _____ Location: _____

Address: _____

Dates of Enrollment: _____ Degree: _____

Date of Graduation: __/__/__ to __/__/__ (for counseling intern, expected graduation timeline)
mo yr. mo. yr.

Specific Training/Workshops/Honors: _____

Professional Memberships

List all memberships in professional organization/societies/academic: _____

Licenses/Registration

State	Type	License Number	Original Issue Date	Expiration Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

*NPI Number: _____ Date Issued: _____

Previous Employment:

Company: _____ Dates Employed: _____

Position: _____ Previous Salary: _____

Supervisor: _____ Phone Number: _____

Reason for leaving: _____

May be contact this employer? Yes No

Company: _____ Dates Employed: _____

Position: _____ Previous Salary: _____

Supervisor: _____ Phone Number: _____

Reason for leaving: _____

May be contact this employer? Yes No

Company: _____ Dates Employed: _____

Position: _____ Previous Salary: _____

Supervisor: _____ Phone Number: _____

Reason for leaving: _____

May be contact this employer? Yes No

DHHS Requires that all employees be cleared through a criminal history check, a state sex offender registry check and the Nebraska (or applicable state), Adult and Child Abuse and Neglect Registry. To conduct the criminal and background checks please answer the following questions.

Where you were born _____
City County State

Please indicate all previous names including maiden names, married names and nick names and dates used.

Please answer the following questions honestly, and to the best of your ability. They are designed to highlight your unique aptitudes, such as being detail-oriented, compassionate etc. It helps us learn more about you, your passions, strengths, and where you might fit into our group practice.

I am eager to work with the following types of clients. _____

While working at a previous job, describe a frustrating experience and how you handled it? _____

Wholeness Healing Center's philosophy is that client healing begins at the door, what does this mean to you and how do you think you can participate in this mission?

What is the difference between neatness and orderliness? Which, in your opinion, which is more important?

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. _____

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, P.C. I understand that I may be submitted to random drug testing at the employer's expense. My refusal to complete this requirement or my positive test result will terminate my employment.

I acknowledge that the information I have furnished is correct to the best of my knowledge and understand that falsification of this information could be grounds for disciplinary action or dismissal from the application process or employment.

By signing this document, I am agreeing to the required nationwide history and criminal background checks.

Please note, that upon interview and offer/acceptance of employment the following documents will need to be supplied: copy of your driver's license or passport, social security card, state licenses and copies of undergraduate and graduate diplomas. These documents are for the purpose of background checks, payroll employee eligibility (I-9), and documents required for credentialing with insurance networks.

Signature

Date