



St. Lucie Eye Associates MD PA  
**Application For Employment**

St Lucie Eye is an Equal Opportunity Employer and is committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

## Personal Information

Name

Address

City

State

Zip

Phone Number

Mobile Number

Email Address

Are You A U.S. Citizen?

Yes

No

Have You Ever Been Convicted Of A Felony?

Yes

No

If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening Test?

Yes

No

## Position

Position You Are Applying For

Available Start Date

Desired Pay

Employment Desired

Full Time

Part Time

Seasonal/Temporary

## Education

School Name	Location	Years Attended	Degree Received	Major

## References

Name	Title	Company	Phone

## Employment History

<b>Employer (1)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (2)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (3)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (4)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip
<b>Employer (5)</b>	Job Title		Dates Employed
Work Phone	Starting Pay Rate		Ending Pay Rate
Address	City	State	Zip

## Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (Please Print)	Signature
Date	