## **Applicant Telephone Interview**

Name:	Date:			
Phone:			ext: 🗆 Yes [	□ No
Email:				
To help us find a case near yo	ou, may I have your add	dress?		
Address:		7'	.1 .	_
City:	State: Zipcode: _			
How did you hear about us?				
☐ Employee:			_ 🗆 Friend	
☐ Job Fair ☐ Ad:				
To help us find a home that y	ou will be comfortable	in I have a	few questions:	<b>:</b>
			_	
Are you an RN or LPN? ☐ RN	_	-	_	
Nursing experience:   Nursi	J		•	lome Care
Other: A	ny CNA experience?	Yes 🗆 N	0	
Skills:  □ Trach □ G-tube □ Vent:	s	Dods		
Can you speak another langu				
can you speak another langu	age:			
What are your available to w  Sun Mon Tues  Shifts: Days Nights  When are you available to st	Wed □ Thurs □ Fri □ Evenings	□ Sat □	Other:	
When are you available to sta Are you afraid of or allergic to		Pirds □ C		
Do you have any environmen	_		mer:	
Do you have any environment	itai alieigies, sucii as si	IIUKE:		
Do you have reliable transpo	 rtation? □ Yes □ No	How far is	too far to drive	?
		711011111111111111111111111111111111111	too idi to di iic	•
"We would love for you come	in a fill out an applicat	ion and mee	et with one of o	our Director of
Nursing. (We want them to co  ☐ AM ☐ PM	<i>me in ASAP)</i> Are morni	ngs or after	noon better for	you?
Great! Let me check our sched	dule. How does		at	sound?
Wonderful! I have you down f				
shortly with the date, time, di prepared to spend about two	rections, and the items			
Office Staff:				