Name (Last, First): _____ Date (MM/DD/YYYY): _____

Please answer the following questions using complete sentences.

1. Please indicate which specialties you are interested in from the provided list.

ED, NICU, L&D, ONC, ICU, Step-down unit (specify if applicable)

2. How willing are you to work night shift? If unwilling, why?

3. Do you currently work for one of our clinical facilities? If so, which one? What is your position and dates of employment?

4. List your previous clinical placements and describe what you found most valuable about those experiences.

5. Describe an experience where you advocated for a patient. *3 minimum sentences.*

6. Describe an experience where you had a work-related conflict and how you resolved it. *3 minimum sentences.*