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osition Desired:	enword ain	abricate Te	Requ	iested Ho	urly Wa	ges:		-3/	Paysi.	
Vhat is your anticipate	ed length of er									
re you eligible for em	ployment in t	he U.S.A. 🗆 `	Yes □ N	0						
re you currently emp	loyed? □ Yes □	No H	lave yo	u given n	otice to					
Nay we contact your c	urrent employ	yer? □ Yes □	No							
Phone: ()	Nar	ne:			Title:					
When are you able to s	Cylnour tacto									
viieli are you able to s	start work!								_	
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Experience and Skills

Please check "yes" for the skills in which you have experienced and indicate the number of years experienced. Please check "no" if you have not performed the task within the last three years.

	Yes	No	# of Years		Yes	No	# of Years
Appointment Scheduling, Computer			Tales	Charting			77
Schedule Management	11,000			Take/ Mount Xrays			
Computer Data Entry				Digital Radiography			
Appointment Scheduling, Computer				Case/ Invisalign Photos			1823.0
Billing				Pour & Trim Models			
Accounts Payable				Fabricate Temp Crowns			
Account Collections	1		The second	4 Handed Assisting			
Treatment Plan Presentation				Assist Crown and Bridge	deq		huby at te
Fee Presentation				Assist Endodontics			
Making Financial Arragements			977	Assist Oral Surgery			6 74
Past Due Account Contact	1 93	on.	navig uov a	Assist Orthodontics	qm.	ylar	MUT NOA
Insurance Processing				Assist Periodontics			
Electronic Claims				Coronal Polishing			
Other:	left			Home Care Instructions			_(- 1) ism
				Soft Tissue Management			Jan and Market
				PSR			
	bis	W.	er Hours per	SRP	e le	illiy	e you are
				Intraoral Camera Photos			STREET, ST

Do you speak a language other than English which could be relevant or helpful in have applied? □ Yes □ No Language(s):	the position for which you
In your previous positions, what duties did you enjoy doing the most and why?	
The second secon	in madior or tradition adver-
In your previous positions, what duties did you enjoy doing the least?	Agoreau Agoreau
	Depres Received
Describe a career obstacle that you encountered in the past and explain how you	u overcame it.

From the following list of core values, please select four that represent you the best.

Efficient	Caring
Compassion	Leadership
Positive	Community
Teamwork	Happiness
Trustworthy	Determined
Focused	Excellence
Collaboration	Growth
Education	Integrity

Employment History:

Employer:

List your present or most recent job first. Cover the last ten years of employment. Resume may not be substituted.

Job Title:				
Address:				
	S	treet	011	
State	Zip Code	22.800a	City	
Phone: ()	Superviso			
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	s gritting and a S	treet	City	
State	Zip Code		City	
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Reason For Leaving:				
Duties/ Work Performed:				

Job Title:	les : tesa that represent you madeg	
Address:		innitities in
, idaiooo.	Street	City
State	Zip Code	swifted
	Supervisor's Name:	i ownest
Title:	8387 H3	
Dates Employed: From	To	
Reason For Leaving:	l briegotty	- Datalici
Duties/ Work Performed:	<u></u>	
References Please list the name, addresorevious employers.	ss, and phone number of three refer	ences who are not related to you and are no
NAME	ADDRESS	PHONE NUMBER
City		
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NAME	ADDRESS	PHONE NUMBER
NAME The information given on the incorrect information will receivent of my employment. I suthorized representatives to ecord, reasons for leaving,	is application is accurate. I understa ender this application void and will b hereby grant permission to Garine & to contact any persons, company, sc and all other information they have	nd that the furnishing of any misleading or e just cause of immediate termination in the & Boza Prosthodontics, it's practices or its dul hools, or health care providers to provide my
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