

Dental One Staffing, Inc. First in Placement

West Palm Beach, FL

Boca Raton, FL.

Ft. Lauderdale, FL.

Stuart/Port. St. Lucie

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

D.O.B.: _____ Social Security #: _____

Home Phone: _____ Cellular Phone: _____

Work Phone: _____ Beeper #: _____

Email Address: _____

Who do we notify in an emergency: _____ Ph.: _____

Year and Make of car: _____ COLOR _____

Drivers License #: _____ RDH license#: _____

Graduation Date: _____ RDH _____ CDA _____ FD _____

Expanded Functions: yes or no Radiology License: yes or no

Is there anything we should know about you? (health, children, current commitments)

References:

Name	Occupation	Phone Number	Years Known
1.			
2.			
3.			

Availability: M _____ T _____ W _____ TH _____ F _____

Hours: M _____ T _____ W _____ TH _____ F _____

Who may we thank for referring you: _____

Desired Salary: _____ Uniform Size: xs s m l xl

Please check which applies: Permanent ___ Temporary ___ Benefits ___

Type of office preferred: Gen: ___ Perio: ___ Ortho: ___ Pedo: ___ Endo: ___ Oral: ___

Applicant's Signature _____ Date: _____

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