



White Bird Clinic
341 E. 12th Avenue
Eugene, Oregon 97401

541-342-8255

Application received: _____
Date Time

APPLICATION FOR EMPLOYMENT

Instructions: Please read the attached job description and summary of White Bird Clinic, then complete this application and return it to the Clinic by the advertised deadline. The staff person you give it to will note the date and time the application is received. Please be sure that you sign and date the application, and that you have answered all the questions. Feel free to use additional pages if necessary, and enclose your resume or vita and letters of recommendation, if you wish.

Name: _____ Phone: _____

Address: _____

Date available: _____ Driver's license: _____

List three references, their addresses, phone numbers and occupations:

1.

2.

3.

I authorize White Bird Clinic to contact any sources and references to verify and obtain information in assessing my qualifications, unless otherwise specified on application. I certify that all my statements on this application are true.

Signature: _____ Date: _____

Please complete the following pages.

Experience: Give your last date of employment: _____

List below your work experience, including volunteer work. Include the job title, name and address of employer, name of supervisor, dates of hiring and leaving, and reason for leaving.

Education: Please list your training and education, including degrees and certifications earned, and list any other qualifications relevant to this position.

Why do you want to work at White Bird? In a collective?

Supplemental Questions

1. How would you work with a large, unruly, slightly crazy, and occasionally unreliable group of volunteers?

2. Given the job description and evaluation criteria, please provide any information about yourself that will help us in making a decision.

For Clinic Use Only

Interview: YES NO
Hired: YES NO

Comments: