

Application for Registered Nurse Manager

Silent Voices/Real Choices Chula Vista

355 K Street, Suite H

Chula Vista, CA 91911

We are excited that you are interested in volunteering for our non-profit pro-life Pregnancy Care Clinic. To find out more about us please visit www.realchoiceschulavista.com or www.silentvoices.org.

Instructions:

1. Please complete this form and sign where indicated.
2. If more space is needed, please attach additional sheets and reference the questions being answered.
3. Please return the following with your application:
 - a. Copy of current state license from the Board of Nursing
 - b. Copy of current ACLS/BLS/PALS/NRP certification if applicable
 - c. Copy of current government issued state identification/Driver's License
 - d. Copy of diploma
 - e. Copy of Tuberculosis (PPD) test
 - f. Copy of Hepatitis-B vaccination or waiver
 - g. Copy of Flu Vaccination or waiver

Part 1: Demographics

Name: _____ Preferred Name: _____

Address: _____

City _____ State _____ Zip _____

Email address: _____@_____

Preferred method of contact: phone text email

Part 2: Education/Training

School: _____ City/State _____ Year Graduated _____

College: _____ City/State _____ Year Graduated _____

Degree Obtained: _____

College: _____ City/State _____ Year Graduated _____

Degree Obtained: _____

Other Studies: _____

Part 3: Professional Background - 3 most recent employers

Name of Employer: _____ Job Title: _____

Dates of Employment: _____ to _____

Manager's Name: _____ Phone Number: _____

Job Duties: _____

Name of Employer: _____ Job Title: _____

Dates of Employment: _____ to _____

Manager's Name: _____ Phone Number: _____

Job Duties: _____

Name of Employer: _____ Job Title: _____

Dates of Employment: _____ to _____

Manager's Name: _____ Phone Number: _____

Job Duties: _____

Have you attended an Ultrasound course? **YES / NO** If yes, list provider and date of completion and include a copy of your certification with this application. _____

Briefly describe your nursing background. What area of specialty do you work in and why?

Part 4: Questionnaire

Briefly describe any prior training or work experience with women in crises pregnancies (counseling, hotline, etc.) _____

Briefly state why you are interested in volunteering/working at Silent Voices/Real Choices Chula Vista.

What special gifts, talents or personality traits do you bring to Silent Voices/Real Choices Chula Vista?

Part 6: Personal and Professional References:

Please list the names, phone numbers and email addresses of three references with whom we may speak. Please make two medical references and one personal friend or ministry/bible study leader.

Name: _____ Relationship: _____

Phone Number: _____

Email: _____ @ _____

Name: _____ Relationship: _____

Phone Number: _____

Email: _____ @ _____

Name: _____ Relationship: _____

Phone Number: _____

Email: _____ @ _____

By signing this application I am acknowledging that I have read the Code of Christian Conduct and will abide by the Code should I be offered this position.

Print Name

Date

Signature