



## APPLICANT SKILLS

Within which dental specialties have you been previously employed? Check and designate number of years.

General Practice \_\_\_\_\_  Oral Surgery \_\_\_\_\_  Periodontics \_\_\_\_\_

Pedodontics \_\_\_\_\_  Orthodontics \_\_\_\_\_  Endodontics \_\_\_\_\_

Prosthodontics Other \_\_\_\_\_

Check off those skills with which you have proven proficiency in past employment experiences and designate years of experience.

Four-handed assisting \_\_\_\_\_

Temp crown fabrication \_\_\_\_\_

Removing temp cement \_\_\_\_\_

Rubber dam placement \_\_\_\_\_

Taking periapical x-rays \_\_\_\_\_

Taking alginate impressions \_\_\_\_\_

Suture removal \_\_\_\_\_

Mixing alginate \_\_\_\_\_

Trimming models \_\_\_\_\_

Pouring models \_\_\_\_\_

Application of sealants \_\_\_\_\_

Prophy jet \_\_\_\_\_

Cavitron \_\_\_\_\_

Perio charting \_\_\_\_\_

Exposing panoramic x-rays \_\_\_\_\_

Placing topical anesthetic \_\_\_\_\_

Patient education \_\_\_\_\_

Post-op instruction

Fluoride application \_\_\_\_\_

Prophylaxis

Root planing/scaling \_\_\_\_\_

Coordination of soft tissue management program \_\_\_\_\_

Charting existing restorations \_\_\_\_\_

Documenting treatment diagnosis \_\_\_\_\_

Typing (wpm: \_\_\_\_\_) \_\_\_\_\_

Completing dental insurance forms \_\_\_\_\_

Processing Medicaid claims \_\_\_\_\_

Appointment scheduling \_\_\_\_\_

Pegboard system \_\_\_\_\_

Patient billing \_\_\_\_\_

Delinquent account collection \_\_\_\_\_

Establish financial arrangements \_\_\_\_\_

Bookkeeping \_\_\_\_\_

Dictaphone \_\_\_\_\_

Describe your experiences with dental practice public relations/marketing. \_\_\_\_\_

# EMPLOYMENT HISTORY AND REFERENCES

Please begin with your most recent position. If attaching resume, complete all questions not answered on your resume.

1. Employer: \_\_\_\_\_ Dates: From \_\_\_\_\_ to \_\_\_\_\_  
Address: \_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title \_\_\_\_\_  
May we call for references?  Yes  No Phone (\_\_\_\_\_) \_\_\_\_\_  
What name are your employment records under? \_\_\_\_\_  
Primary duties: \_\_\_\_\_  
\_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_  
Reasons for leaving: \_\_\_\_\_

2. Employer: \_\_\_\_\_ Dates: From \_\_\_\_\_ to \_\_\_\_\_  
Address: \_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title \_\_\_\_\_  
May we call for references?  Yes  No Phone (\_\_\_\_\_) \_\_\_\_\_  
What name are your employment records under? \_\_\_\_\_  
Primary duties: \_\_\_\_\_  
\_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_  
Reasons for leaving: \_\_\_\_\_

3. Employer: \_\_\_\_\_ Dates: From \_\_\_\_\_ to \_\_\_\_\_  
Address: \_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title \_\_\_\_\_  
May we call for references?  Yes  No Phone (\_\_\_\_\_) \_\_\_\_\_  
What name are your employment records under? \_\_\_\_\_  
Primary duties: \_\_\_\_\_  
\_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_  
Reasons for leaving: \_\_\_\_\_

4. Employer: \_\_\_\_\_ Dates: From \_\_\_\_\_ to \_\_\_\_\_  
Address: \_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title \_\_\_\_\_  
May we call for references?  Yes  No Phone (\_\_\_\_\_) \_\_\_\_\_  
What name are your employment records under? \_\_\_\_\_  
Primary duties: \_\_\_\_\_  
\_\_\_\_\_ Salary: Start \_\_\_\_\_ End \_\_\_\_\_  
Reasons for leaving: \_\_\_\_\_

**PROFESSIONAL GOALS/CAREER PATH (Handwrite, please)**

1. What are your short-term (1 year) employment goals? How do you perceive our practice assisting you to fulfill these goals? \_\_\_\_\_

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2. What are your long-term (5 year) employment goals? \_\_\_\_\_

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3. What makes a position enjoyable to you? What previous position did you find to be the most rewarding, and why? \_\_\_\_\_

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