

SAN JOAQUIN DENTAL SOCIETY



“Promoting the health of the public for over 100 Years”

Serving the counties of CALAVERAS, SAN JOAQUIN, AND TUOLUMNE and the City of Galt
7849 N. Pershing Ave. • Stockton, CA 95207 • (209) 951-1311 • FAX (209) 951-1321

Auxiliary Employment Referral Service

Thank you for contacting the San Joaquin Dental Society regarding the Auxiliary Employment Referral Service. The following information gives you details on how this service functions.

Effective 3/7/91 the Board of Directors of the San Joaquin Dental Society established the following guidelines for the Auxiliary Employment Referral Service.

1. There is no charge to dental auxiliaries who wish to register with the San Joaquin Dental Society's Auxiliary Employment Referral Service.
2. Auxiliaries must complete the attached application and return it to the office of the San Joaquin Dental Society.
3. Applicants may attach resumes or letters of recommendations to their completed applications.
4. All applications will be kept in an “active” file for a period of one (1) month from the date received in the Society Office.
5. IMPORTANT! – It is the responsibility of each applicant to notify the San Joaquin Dental Society at the end of one (1) month if they have not been employed and wish to have their applications placed in the “active” file for one (1) more month. (This process may continue until the applicant is employed.)
6. All expired applications will be dropped from the “active” file and placed in an “inactive” file for one (1) month. At the end of the inactive period the application will be discarded.
7. Applicants will not receive a list of member dentists who have auxiliary positions available in their office.
8. It will be the policy of the Society not to maintain a list of members who have positions available in their office, but rather to mail copies of “active” auxiliary applications to members upon request.

IF YOU HAVE ANY QUESTIONS PERTAINING TO THE ABOVE, PLEASE DISCUSS THEM WITH THE STAFF OF THE SAN JOAQUIN DENTAL SOCIETY.

San Joaquin Dental Society - Employment Referral Information

Please Print

Position Applying for: DA RDA RDAEF RDH RDHEF Recept. Office Mgr. Other _____
 RDA Specializing in: _____

Total Years of experience in the above position? _____ Years _____ Months

NAME _____ How soon could you start work? _____

Address _____ City _____ Zip _____

Home Phone () _____ Cell () _____ Message Phone () _____ Friend Relative

Cities you will work in: Stockton Lodi Manteca Tracy Sonora San Andreas Other _____

Are you seeking Full-time Part-time Will you work evenings? Yes No

Are you willing to do "temporary work" while seeking a permanent position? Yes No

Education

Last High School Attended: _____ City _____ State _____ Years Completed: _____

College, Trade or Specialty Training:

Name _____ Location _____ Dates Attended _____ to _____ Degree/Certification _____

Name _____ Location _____ Dates Attended _____ to _____ Degree/Certification _____

Dental Certificates or Licenses (Renewal date and license number):

X-ray Certification Date _____ Coronal Polishing Date _____ CPR Renewal Date _____

RDA Renewal Date ____/____ License # _____ RDH Renewal Date ____/____ License # _____

Previous Employment (List most recent position first)

Name of Employer	Address, City, State & Phone	Last Position Title	Date Hired	Date Departed	Reason for Leaving
<input type="checkbox"/> GP <input type="checkbox"/> Specialist:					
<input type="checkbox"/> GP <input type="checkbox"/> Specialist:					
<input type="checkbox"/> GP <input type="checkbox"/> Specialist:					
<input type="checkbox"/> GP <input type="checkbox"/> Specialist:					

Are you currently employed Yes No

Do you have any objection if a potential employer wants to contact a prior employer? Yes No Signature _____

If yes, please explain: _____

Do you have any objection to being listed on our website "auxiliaries seeking employment"? Yes No Signature _____

If you are bilingual, please list language(s): _____

IMPORTANT INFORMATION FOR APPLICANT -- READ CAREFULLY BEFORE SUBMITTING APPLICATION TO THE SAN JOAQUIN DENTAL SOCIETY:

1. Your application will be placed in our active file for a period of one (1) month. If after one (1) month, you have not been employed, it is your responsibility to contact the San Joaquin Dental Society to advise the staff to keep your application active.
2. In order to establish good business ethics, and prevent a conflict of interest for our Society staff, it is the policy of the San Joaquin Dental Society that an applicant who is currently employed by a member of this Society, and has not provided notice of separation to that employer, will not be placed on the active referral service. (Upon notice to your current employer, please contact the Society office and your application will be activated.)
3. Your application will be distributed to members of the San Joaquin Dental Society upon request.

I understand that information on this application is subject to verification. Further, I understand that any false statements or omissions may be cause for dismissal by an employer. Signature _____ Date _____