



An Equal Opportunity Employer

# SeaSpine, Inc. Employment Application

### Please Print

\_\_\_\_\_  
Date Last Name First Name Middle Initial

### Present Address

\_\_\_\_\_  
No. & Street City State Zip

### Permanent Address (if different from present address)

\_\_\_\_\_  
No. & Street City State Zip

(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Home Phone Cell Phone

### Employment Desired

Position applying for: \_\_\_\_\_

Salary Desired: \_\_\_\_\_ Date Available: \_\_\_\_\_

- How did you hear about this position?  SeaSpine Website  Other website (specify below)
- Advertisement (specify below)  Self  Employee Referral (specify below)  Other (specify below)

\_\_\_\_\_  
Name of Referral Source

### Personal Information

Have you ever applied to or worked for SeaSpine, Inc. before?  Yes  No

If yes, when? \_\_\_\_\_

Do you have any friends or relatives working for SeaSpine, Inc.?  Yes  No

If yes, state name(s) and relationship:

\_\_\_\_\_  
Name Relationship

\_\_\_\_\_  
Name Relationship

If hired, would you have a reliable means of transportation to and from work? .....  Yes  No

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.) .....  Yes  No

If hired, can you present evidence of your U.S. citizenship or proof of your legal right work in this country? .....  Yes  No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? .....  Yes  No

If no, describe the functions that cannot be performed.

\_\_\_\_\_

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)



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Have you ever been convicted of a criminal offense (felony or serious misdemeanor)?  
(Misdemeanor convictions for marijuana-related offenses that are more than two years old  
need not be listed.) .....  Yes  No

If yes, state nature of the crime(s), when and where convicted, and disposition of the case.  
\_\_\_\_\_  
\_\_\_\_\_

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

## Education, Training, and Experience

School	Name and Address	No. of Years Completed	Did you Graduate?	Degree or Diploma
<b>High School</b>	Name _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	Address _____			
	City _____ State _____ Zip _____			
<b>College/ University</b>	Name _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	Address _____			
	City _____ State _____ Zip _____			
<b>Vocational/ Business</b>	Name _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	Address _____			
	City _____ State _____ Zip _____			
<b>Health Care Training</b>	Name _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	Address _____			
	City _____ State _____ Zip _____			
<b>Other</b>	Name _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	Address _____			
	City _____ State _____ Zip _____			



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#### Employment History

List below all present and past employment starting with your most recent employer. You must complete this section even if attaching a resume.

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Your Supervisor's Name

\_\_\_\_\_  
Address & Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Dates of Employment: \_\_\_\_\_  
From To

Salary: \_\_\_\_\_  
Starting Ending

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference? .....  Yes  No

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Your Supervisor's Name

\_\_\_\_\_  
Address & Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Dates of Employment: \_\_\_\_\_  
From To

Salary: \_\_\_\_\_  
Starting Ending

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference? .....  Yes  No

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Type of Business

\_\_\_\_\_  
Your Supervisor's Name

\_\_\_\_\_  
Address & Street

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

Dates of Employment: \_\_\_\_\_  
From To

Salary: \_\_\_\_\_  
Starting Ending

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference? .....  Yes  No



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### Please Read Carefully, Initial Each Paragraph and Sign Below

\_\_\_\_\_ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_ I hereby authorize SeaSpine, Inc. to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release SeaSpine, Inc., my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and SeaSpine, Inc. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or SeaSpine, Inc., and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and SeaSpine Inc.'s designated representative.

\_\_\_\_\_ Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by SeaSpine Inc., I am entitled to copies of any such public records obtained by SeaSpine, Inc. unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date