



Asian Professional Staffing Enterprise

Application

Application Date _____

Contact Information

Last Name _____ First _____ Middle _____

Address _____

Address _____

Email _____

Phone _____

What is the best time to contact you?

- Morning
 Evening

Personal Information

Date of Birth (mm/dd/yyyy) _____

Age _____

Religion _____

Nationality _____

Sex?

- Male Female

Marital Status:

- Married
 Single
 Divorced
 Widowed

Height _____

Weight _____

Eye Color _____

Hair Color _____

Do you Have any Children?

- Yes
 No

If so, number? _____

Do you have any physical disabilities?

Yes _____

No _____

If so, please explain.

Spouse's Information (If Married)

Last _____ First _____ Middle _____

Date of Birth (mm/dd/yyyy) _____ Place of Birth _____

Occupation _____

Experience

Work	How Long?
ICU	
CCU	
O.R.	
PEDI	
PSYCH	

Work	How Long?
ER	
OB/GYN	
MED/SUR	
Nursery	
Other	

Clinical	Number of Weeks?
Medicine	
Surgery	
Pediatrics	
Psychiatry	
Other	

Special Study or Research work _____

What type of Nursing do you prefer?

Are you under contract with any Hospital in the Phillipines?

Yes No

_____ If so, Name of Hospital?

Education

Name of School	Location	Date	Degree?
High School			
College			
Graduate			
Other			

Employment History

	Most Recent Employer	Previous Employer	Previous Employer
Hospital	_____	_____	_____
Address	_____	_____	_____
Type of hospital	_____	_____	_____
Position Held	_____	_____	_____

	Area of Experience	Area of Experience	Area of Experience
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Dates Employed	_____	_____	_____
Salary	_____	_____	_____

References (work-related, excluding relatives)

	Reference 1	Reference 2	Reference 3
Name	_____	_____	_____
Address	_____	_____	_____
Phone	_____	_____	_____

Have you or any of your immediate relatives applied for an immigrant visa?

- Yes No

 If so, when?

Have you ever been refused a visa to travel in the U.S.?

- Yes No

If you responded **YES** to any of the above questions, provide the details on a separate sheet of paper.

I understand that I must take the State Board Examination for Registered Nursing in the State I am placed. I also understand that I must be a recipient of a CGFNS CERTIFICATE, TOEFL, TSE, TWE in order to be placed in the U.S. However, it would be advisable to take the TOEFL while in the Philippines.

Signature of applicant

Date

Please Send Application TO: **APSE**
Attn: Virginia Casunuran
1911 Summer Breeze, #C
Mission, TX, USA
78572