

**PRE-EMPLOYMENT QUESTIONNAIRE**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET \_\_\_\_\_ APT# \_\_\_\_\_  
CITY, STATE, ZIP \_\_\_\_\_

TELEPHONE #'S: \_\_\_\_\_  
CELL \_\_\_\_\_ HOME \_\_\_\_\_  
WORK \_\_\_\_\_

CURRENT POSITION & EMPLOYER: \_\_\_\_\_  
\_\_\_\_\_

DATE AVAILABLE TO BEGIN EMPLOYMENT: \_\_\_\_\_

SALARY DESIRED (**REQUIRED**): \_\_\_\_\_

PRI COURSES ATTENDED & DATES:

**COURSE NAME:**

**DATE ATTENDED:**

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**In the space provided, please answer the following questions:**

1. Why are you interested in working at the Hruska Clinic?

2. What skills/qualities/assets would you bring to Hruska Clinic?

3. What specific topics, diagnoses, or issues related to Postural Restoration are you passionate about & why? (ex: scoliosis, running, breathing, pelvic floor, jaw etc.)

4. What are your professional short term goals (5 years)?

5. What are your professional long term goals (10+ years)?

**Please attach your resume and send completed forms to: [lori@hruskaclinic.com](mailto:lori@hruskaclinic.com), or to Lori Thomsen, Hruska Clinic, 5241 R Street, Lincoln NE 68504**