

Step 1: USA Nurses

Nurses of Today: Create An Account

Welcome! We're excited to have you on board with us. Your FREE Nurses of Today membership starts here! In order for us to better understand our nurses, please take the time to fill out the whole application process thoroughly.

Personal Information

First name:	<input type="text"/>
Last name:	<input type="text"/>
Address:	<input type="text"/>
City:	<input type="text"/>
Postal Zip:	<input type="text"/> Country: <input type="text" value="Not set"/>
State:	<input type="text" value="Not set"/>
Primary Phone:	<input type="text"/>
Mobile Phone:	<input type="text"/>
Work Phone:	<input type="text"/>
Career Level:	<input type="text" value="Not set"/>
Degree/Level Attained:	<input type="text" value="Not set"/>
Gender:	<input type="text" value="Not set"/> (optional)

Login Information

Username:	<input type="text"/>
Email Address:	<input type="text"/>
Confirm Email:	<input type="text" value="admin"/>
Password:	<input type="password" value="••••••"/>
Confirm Password:	<input type="text"/>

- Sign up for a free subscription to the Nurses of Today email newsletter!
- Yes! I agree to receive future email alerts on discounts and promotional information through Nurses of Today and its affiliated partners.

[CREATE PROFILE](#)

Step2:

| Nurses of Today: Online Application

Please read carefully and attest to application.

| TERMS AND CONDITIONS OF USE

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Please read this page carefully. Your use of this site constitutes your agreement to the following terms and conditions. If you do not agree with any of the terms and conditions stated within, please do not use this web site or any associated services. These terms and conditions are subject to change at any time by updating this page. Periodically, you should return and review these terms and conditions. Any use of the site following the posting of any new or modified usage agreement constitutes your acceptance of the modified agreement.

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This site makes no guarantees as to the level of success a user may achieve by using the service. You may not be entitled to any refund, rebate or retribution for usage that you determine to be unsuccessful.

We make no guarantee that your postings/Submissions/Resumes will be accessible for the entire term of its listing. Computer outages, software failure and other technical and non-technical issues may cause temporary outages that we cannot be held liable for.

You agree that your job listings and resumes may be available on the job boards of our networked partners. If you do not want your jobs listed on additional job boards for free, you need to email info@nursesoftoday.com with your request.

I have read the above and fully understand it. By checking the box above, you attest that all information submitted above and on previous pages of this web application is accurate.

SUBMIT

Step 3:

| Nurses of Today: Online Application

Welcome to a new beginning. You are steps away from the start of a new chapter in your life and we are proud to be a part of that. By joining our family of nurse professionals we extend all of our resources and efforts to help you accomplish your goals. Begin now by filling out our application and our nurse advisors will be in touch with you shortly.

| Personal Information

What is the best way to contact you?

What is the best time to reach you?

| Professional Information

Desire Job Location:

City and State

City:

State:

Primary Specialty:

Choose up to 2 more specialties in which you have had 1 years of experience in the past 3 years:

- Advanced Practice Nursing
- Ambulatory Care Nursing
- Business in Nursing
- Cardiac Care Nursing
- Cardiac Cath Lab Nursing
- Case Management Nursing

Desired Salary/Wage:

Desired number of hours per week:

Would you be willing to relocate if the job requires? Yes No

Would you be willing to work overtime if the job requires? Yes No

Do you have a valid driver's license or access to reliable transportation? Yes No

If the assignment you're applying involves driving a motor vehicle, will you release your driving record (MVR) to us for review? Yes No

[NEXT](#) [SAVE & FINISH LATER](#)

Step 4:

Employment History

I don't have any work experience.

Previous Employer 1

Facility/Employer Name:

Employer Phone Number:

Supervisor Name:

Supervisor Email:

Supervisor Phone:

Address:

City:

Zip Code: State:

Country:

Your Job Title:

Ending Salary:

Start Date:

End Date:

Hours per week:

Shift Worked:

Reason for Leaving:

Additional Information

Have you ever been discharged or asked to resign from a position?

Yes No

If Yes, please explain:

Do you have any gaps in your employment?

Yes No

If Yes, please explain:

Step 5:

Professional Reference

I don't have any reference.

Reference 1

Name:	<input type="text"/>
What is your relationship with this individual?	<input type="text"/>
Phone Number:	<input type="text"/>
Email Address:	<input type="text"/>
Address:	<input type="text"/>
City:	<input type="text"/>
Zip Code:	<input type="text"/> State: <input type="text" value="Not set"/>
Country:	<input type="text" value="Not set"/>

Professional Reference

Reference 2

Name:	<input type="text"/>
What is your relationship with this individual?	<input type="text"/>
Phone Number:	<input type="text"/>
Email Address:	<input type="text"/>
Address:	<input type="text"/>
City:	<input type="text"/>
Zip Code:	<input type="text"/> State: <input type="text" value="Not set"/>
Country:	<input type="text" value="Not set"/>

[NEXT](#)

[SAVE & FINISH LATER](#)

[NEED ASSISTANCE?](#)

Step 6:

| Primary License or Certification

Description:

State:

Number:

Expiration Date:

| Additional Certifications & Experience

Please select any additional certificates, training, of experience you might have.

Certifications ACLS PALS NALS
 CEN NRP ENA

Experience with the following Software Applications: AdminRX MediTech iConnect Horizon

Experience as a Charge Nurse: Yes No

| Supplemental Questionnaires

In State of California, to be considered "qualified" under the Americans with Disabilities Act, an applicant must be able to perform the essential functions of the job, without reasonable accommodation. "Reasonable Accommodation" is a modification or adjustment to a job, the work environment, or the way things usually are done that enables a qualified individual with a disability to enjoy equal employment opportunity.

Can you perform the essential functions of the position for which you have applied, with or without accommodation by the company?

Yes No

If NO, please identify what job functions you cannot perform, with or without an accommodation by the company:

Are you currently engaged in any illegal use of drugs which would prevent you from safely performing the essential function of your job?

Yes No

If Yes, please explain:

Step 7:

advertisement



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Full-Service Elderly Living

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| Welcome, user1 lname

We are excited to have you join us at Nurses of Today. Below you will find a list of options to begin browsing our site and taking advantage of your membership. Search jobs, catch up on weekly blogs, or check out our discounts, we are constantly adding new features every month. You can also edit your profile and share pictures with other members.

Better yet, become a Premium Member and qualify yourself for extra discounts and more features in our website

 My Profile	 Search Jobs	 My Jobs	 Weekly News
 Dream Job	 My Resume	 Forums	 Search Profiles
 Inbox	 My Groups	 My Pictures	 Search Pictures
 Premium Membership	(Free! Join Now)		

* You dont have a resume.