

Job Planning & Tracking Tool



Practice Preference Worksheet

Practice Style

	<i>Preferred</i>	<i>Consider</i>	<i>Not at all</i>
Private	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospital-owned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teaching Hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Health Center	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
National Health Services Corps/Indian Health Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Veterans Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locum Tenens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hospitalist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Urgent Care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Administrator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical Director	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industrial Medicine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Practice Type

Solo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partnership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Small Practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Location

Urban	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suburban	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rural	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Geographic Preference

West	Pacific (WA, OR, CA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Mountain (ID, MT, WY, NV, UT, CO, AZ, NM)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Midwest	West North Central (ND, SD, MN, IA, NE, MO, KS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	East North Central (WI, MI, IL, IN, OH)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
South	West South Central (OK, AR, TX, LA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	East South Central (KY, TN, MS, AL)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	South Atlantic (WV, DE, MD, DC, VA, NC, SC, GA, FL)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Northeast	Middle Atlantic (NY, PA, NJ)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	New England (ME, NH, VT, MA, CT, RI)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

International

Countries of Preference _____
