

# Office Information



**phone** (518) 280-8932  
**fax** (866) 811-3374  
**address** P.O. Box 12593  
Albany, NY 12212

Thank you for choosing Breathe Easy Staffing Solutions for your dental employment needs. Please help us get to know your office by completing and returning the information form below.

Fax completed form to Breathe Easy Staffing Solutions, LLC fax (866) 811-3374 or mail to address above.

## Contact Information

Name of Practice \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address* *Suite/Unit #*

\_\_\_\_\_

*City* *State* *ZIP Code*

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Contact Person \_\_\_\_\_ Email: \_\_\_\_\_

How did you year about us? \_\_\_\_\_

## Hours & Payroll

Work Day Hours

<input type="checkbox"/> Monday	From: _____	To: _____	Lunch: _____
<input type="checkbox"/> Tuesday	From: _____	To: _____	Lunch: _____
<input type="checkbox"/> Wednesday	From: _____	To: _____	Lunch: _____
<input type="checkbox"/> Thursday	From: _____	To: _____	Lunch: _____
<input type="checkbox"/> Friday	From: _____	To: _____	Lunch: _____
<input type="checkbox"/> Saturday	From: _____	To: _____	Lunch: _____
<input type="checkbox"/> Sunday	From: _____	To: _____	Lunch: _____

Names of Dentists practicing in your office: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will the temporary employee be paid the day he/she works?  Y  N If no, when is payroll? \_\_\_\_\_

## Equipment & Routines

Are scrub jackets provided for the temporary employee?  Y  N

Does your office use digital x-rays?  Y  N

Bitewing x-rays are taken  Every 6 months  Yearly  Varies

Panoramic x-ray is taken  Every 3 years  Every 5 years  Varies

Fluoride Treatments are given  Every 6 months  Yearly  Varies

Time allotted for routine adult prophylaxis: \_\_\_\_\_

**We look forward to working with you! Thank you, Breathe Easy Staffing Solutions, LLC**