

# Traveler Questionnaire



Please Print or type Clearly.

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Today's Date \_\_\_\_\_

Applicant Name \_\_\_\_\_ Professional Specialties \_\_\_\_\_

Permanent Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Numbers \_\_\_\_\_ The best time to reach me is \_\_\_\_\_

Is this your first travel assignment?    Yes    No

I have taken    1-2    3-4    5-6    6+ Assignments.

My geographic preferences are:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

My shift preferences are:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

I am available to begin an assignment on \_\_\_\_\_.

My main reasons for taking a travel assignment are (Rank Order 1-7):    When not working, I enjoy (please write specifics):

- |                                   |                                  |
|-----------------------------------|----------------------------------|
| ___ Advance my career             | ___ Sports _____                 |
| ___ Better compensation           | ___ Recreation _____             |
| ___ Better benefits               | ___ Entertainment _____          |
| ___ New experiences               | ___ Museums and historical sites |
| ___ New locations/see the country | ___ Educational advancement      |
| ___ Change of lifestyle           | ___ Shopping                     |
| ___ Meet new friends              | ___ Other _____                  |

My ideal compensation is \_\_\_\_\_.

The most important considerations to me in taking a travel assignment are:

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I plan on traveling for \_\_\_\_\_ period of time.

Are you considering a future permanent placement?    Yes    No

ACCESS Nursing Services would like to thank you for taking the time to complete this questionnaire. We will utilize the information provided only to provide you with travel opportunities that meet your criteria. We look forward to finding you the **ultimate travel assignments!**