



# Clinic Profile

Please help us match your clinic to qualified chiropractors seeking employment by providing a few details about your clinic and what you are willing to offer applicants. We want to find you a 'good fit' to ensure the stability of your clinic.

## Clinic Information

**Name of Clinic:** \_\_\_\_\_

**Location:**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Address City State ZC

- If Additional Locations, How many? \_\_\_\_\_
- Is your clinic part of a chain or franchise? \_\_\_\_\_ YES \_\_\_\_\_ NO

**Size of Clinic:**

- Approximate sq. footage: \_\_\_\_\_
- Average number of patients seen Per Day: \_\_\_\_\_ Per Week: \_\_\_\_\_

**Equipment at Clinic:**

- No. of Decompression Tables \_\_\_\_\_
- No. of IST Tables \_\_\_\_\_
- No. of Treatment Rooms \_\_\_\_\_

Rehab\_\_\_\_ Vibe\_\_\_\_ Wobble Chair\_\_\_\_ Thera bands \_\_\_\_\_ Percussor \_\_\_\_\_ EMS \_\_\_\_\_

Additional Equipment: \_\_\_\_\_

**Style of Adjusting:** (Diversified, Activator, Drop, etc.)

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



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**Hours of Operation:**

Mon.: \_\_\_\_\_ Tues. \_\_\_\_\_ Wed. \_\_\_\_\_ Th. \_\_\_\_\_ Fri. \_\_\_\_\_ Sat. \_\_\_\_\_

*Package Basics*

**Offered Salary:** \_\_\_\_\_

**Benefits:** \_\_\_\_\_

**Vacation:** \_\_\_\_\_

*Community*

**Area Attractions**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Institutions:**

- Universities: \_\_\_\_\_
- High Schools: \_\_\_\_\_
- Other: \_\_\_\_\_

**Chain Stores in Area:**

\_\_\_\_\_

\_\_\_\_\_

**Demographics:**

- Population: \_\_\_\_\_
- Area Industry: \_\_\_\_\_



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## Owner Preferences

Experience Min.: \_\_\_\_\_ Languages: \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Age Range: \_\_\_\_\_

By when do you want to hire? \_\_\_\_\_  
(ASAP, 3 Months, 6 Months, Next Year)

What are three characteristics you consider vital for a chiropractor working at your clinic?

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## Owner Information

**Name:** \_\_\_\_\_  
(Please Print Name) (Name of Clinic & City)

### **Contact Information:**

Work Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

**Short Biography:** (You may include years of practice, places worked, organizations, & outside interests, etc.)

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