



Elite Medical Scribes, LLC
1000 LaSalle Ave, SCH 435
Minneapolis, MN 55403
www.EliteMedicalScribes.com

Name:

Address:

City, State, Zip:

E-Mail:

Phone:

College/University:

Major(s):

Minor(s):

Graduation Date:

GPA:

Reference #1

Name:
Relationship:
Phone:

Reference#2

Name:
Relationship:
Phone:

I am interested in:

Full Time

Part Time

I am applying for:

Scribe

Scribe Trainer

What are your career goals?

Why do you want to be a Scribe?

Where did you hear about Elite Medical Scribes?

Please submit application to our offices with a one-page resume
or send electronically to jobs@elitemedicalscribes.com