

## PHYSICIAN & NURSE PRACTITIONER JOB POSTING FORM

Please complete form and email to <u>recruitment@sidfp.com</u> or fax 250.658.3304. If you have any questions regarding job posting requests, please contact the South Island Division of Family Practice at 250.658.3303.

		HIRING NEED	
Please select	Locum	Permanent	Temporary

CLINIC INFORMATION								
Name of Clinic								
Clinic Location	Street Address							
	City							
	Province				Posto	al Code		
Practice Type	Solo Group		Other					
No. of Physicians in Practice	No. of MC Practice		OAs in					
	Monday:	From			То			
Clinic Hours	Tuesday:	From			То			
	Wednesday:	From			То			
	Thursday:	From			То			
	Friday:	From			То			
	Saturday:	From			То			
EMR								

POSITION INFORMATION					
Dates Required	From		То		
Hours	Full-time	Part-1	time	Either/Flexible	
	Obstetrics	Yes	No	Optional	
	ER	Yes	No	Optional	
Requirements	Hospital	Yes	No	Optional	
	House Calls	Yes	No	Optional	
	Residential Care	Yes	No	Optional	

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	Palliative Care	Yes	No No	Optional
	Surgical Assist	Yes	No No	Optional
	On Call	Yes	No No	Optional
	On Call Details			
No. patients per day	20 2	20-25 25-30	30-35	35-40 >40
Overhead Split				
Daily Minimum				
If Locum, indicate what payment is based on	Billings		] MSP Payment	s Received
Additional Information				

<b>CONTACT INFORMATION</b> (Note this information will be publicly available on internet postings, etc.)		
Contact Person		
Email		
Phone		
Cell		

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