



# HealthCare Employment Network

Bringing HealthCare Professionals together with  
Nationwide Employment Opportunities



## HCEN's HealthCare Applicant Profile Service - 855.335.9924

Agency Name:

Date:

Agency Designate Name:

Phone:

**ALL Specialty Profiles - Advanced Practice Nursing** **Category 1 \$17.00**

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Physician Assistant | <input type="checkbox"/> Nurse Practitioner | <input type="checkbox"/> Certified Nurse Mid-Wife | <input type="checkbox"/> Clinical Nurse Specialist |
|--|---|---|--|

**Profile Delivery Email Category 1:**

**ALL Specialty Profiles - Registered Nurse** **Category 2 \$15.00**

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Cardiac Cath Lab     | <input type="checkbox"/> PICU - Pediatric     | <input type="checkbox"/> Oncology                  | <input type="checkbox"/> PACU                    |
| <input type="checkbox"/> Case Manager         | <input type="checkbox"/> Labor & Delivery     | <input type="checkbox"/> OR - General Surgery      | <input type="checkbox"/> PCU - Stepdown          |
| <input type="checkbox"/> Dialysis             | <input type="checkbox"/> Long Term Acute Care | <input type="checkbox"/> OR - CVOR General Surgery | <input type="checkbox"/> Pediatrics              |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Maternal-Newborn     | <input type="checkbox"/> OR - RN First Assistant   | <input type="checkbox"/> Postpartum              |
| <input type="checkbox"/> ICU - Critical Care  | <input type="checkbox"/> Medical-Surgical     | <input type="checkbox"/> OR - Outpatient Pre/Post  | <input type="checkbox"/> Rehab & Skilled Nursing |
| <input type="checkbox"/> NICU - Neonatal      | <input type="checkbox"/> Newborn Nursery      | <input type="checkbox"/> OR - Pediatric Surgery    | <input type="checkbox"/> Telemetry               |
|   |   |  | <input type="checkbox"/> Wound Care - Certified  |

**Profile Delivery Email Category 2:**

**ALL Specialty Profiles - Therapist** **Category 3 \$17.00**

- |   |   |   |  |
|---|---|---|--|
| <input type="checkbox"/> Physical Therapist | <input type="checkbox"/> Occupational Therapist | <input type="checkbox"/> Recreational Therapist | <input type="checkbox"/> Speech Language Pathologist |
|---|---|---|--|

**Profile Delivery Email Category 3:**

**ALL Specialty Profiles** **Category 4 \$17.00**

- |  |  |                                       |   |
|--|--|---------------------------------------|---|
| <input type="checkbox"/> Pharmacist - Hospital | <input type="checkbox"/> Pharmacist - Retail | <input type="checkbox"/> Perfusionist | <input type="checkbox"/> CRNA - Anesthetist |
|--|--|---------------------------------------|---|

**Profile Delivery Email Category 4:**

**ALL Specialty Profiles - Allied Health Services** **Category 5 \$10.00**

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> COTA / OTA                   | <input type="checkbox"/> Cytologist              | <input type="checkbox"/> Nuclear Med Tech           | <input type="checkbox"/> RN-Corrections             |
| <input type="checkbox"/> PTA                          | <input type="checkbox"/> Dosimetrist             | <input type="checkbox"/> OB Ultrasound Tech         | <input type="checkbox"/> RN-Clinic Nursing          |
| <input type="checkbox"/> Respiratory Therapist        | <input type="checkbox"/> Echo Tech               | <input type="checkbox"/> Pharmacy Tech-Hospital     | <input type="checkbox"/> RN-Dementia Nursing        |
| <input type="checkbox"/> Cath Lab Tech                | <input type="checkbox"/> EEG Tech                | <input type="checkbox"/> Pharmacy Tech-Retail       | <input type="checkbox"/> RN-Endoscopy               |
| <input type="checkbox"/> Cardiac Intervention Tech    | <input type="checkbox"/> Emergency Medical Tech  | <input type="checkbox"/> Polysomnographer Tech      | <input type="checkbox"/> RN-Home Health             |
| <input type="checkbox"/> Surg Tech- General Surgery   | <input type="checkbox"/> Histologist             | <input type="checkbox"/> Radiation Therapy Tech     | <input type="checkbox"/> RN-Hospice Palliative Care |
| <input type="checkbox"/> Surg Tech- CVOR General Surg | <input type="checkbox"/> Medical Laboratory Tech | <input type="checkbox"/> Radiology Tech             | <input type="checkbox"/> RN-Immunization            |
| <input type="checkbox"/> CFA / CSA- CVOR General Surg | <input type="checkbox"/> Medical Tech            | <input type="checkbox"/> Ultrasound Tech            | <input type="checkbox"/> RN-Long Term Care          |
| <input type="checkbox"/> Bone Densitometry            | <input type="checkbox"/> Mammographer            | <input type="checkbox"/> Vascular Intervention Tech | <input type="checkbox"/> RN-PICC Nurse              |
| <input type="checkbox"/> CT Scan Tech                 | <input type="checkbox"/> MRI Tech                | <input type="checkbox"/> Vascular Ultrasound Tech   | <input type="checkbox"/> RN-Psychiatric             |

**Profile Delivery Email Category 5:**

## HealthCare Professional's Preferred Travel Assignment / Job Location (s)

When the HealthCare Professional is completing their Applicant Profile they will have the opportunity to select the State (s) they are interested in. The majority of applicants choose "All States"

Please make your selections of the states you would like to receive, that Applicant has chosen as "Preferred Assignment / Job Location"

Check "State(s)" that you are interested in

- AL  AK  AZ  AR  CA  CO  CT  DE  DC  
 FL  GA  HI  ID  IL  IN  IA  KS  KY  LA  ME  MD  MA  MI  
 MN  MS  MO  MT  NE  NV  NH  NJ  NM  NY  NC  ND  OH  OK  
 OR  PA  RI  SC  SD  TN  TX  UT  VT  VA  WA  WV  WI  WY

I would also be interested inquiries about

- Caribbean Assignments  International Assignments

When an applicant chooses preferred location as "ALL STATES" and your agency has selected individual states, would you like those profiles also forwarded?  Yes  No

HCEN's HealthCare Applicant Profile Service Agreement

This sales agreement between:

Date:

HealthCare Employment Network, LLC

P.O. Box 55528  
Little Rock, AR 72215  
Phone: 855-335-9924  
Fax: 866-553-3618

and (Agency Name) \_\_\_\_\_ (the "Purchaser") of the second part in consideration of the covenants and agreements contained in this Sales Agreement, the parties to this Agreement agree as follows:

1. Sale of "Applicant Profiles"

HealthCare Employment Network, LLC will sell, transfer and deliver to the Purchaser the following:

HealthCare Professional Applicant Profiles selected In "Applicant Profiles" selection form

"Applicant Profile" shall mean a Healthcare Professional has completed an application and primary skills assessment. The applicant has the option to add a secondary specialty skills assessment, & upload a resume / cv, if they have elected any of the prior options they will also be include with the "Applicant Profile" along with and excel data sheet with the Healthcare Professionals pertinent data for easy uploading of data.

All Applicant Profiles are sent via email. In addition to the definition of "Applicant Profile" above, each Applicant Profile must meet the following criteria to be a valid Profile. HealthCare Employment Network, LLC will confirm the Applicant Profile to be (i) a real person, (ii) a HealthCare Professional, (iii) have the right to work in the United States, and (iv) shall have been collected in conformance with the privacy policy of HealthCare Employment Network, LLC (which policy can be reviewed at [HealthCareTraveler-Jobs.com](http://HealthCareTraveler-Jobs.com), [HealthCareTraveler-Lounge.com](http://HealthCareTraveler-Lounge.com) or [HealthCareTraveler-JobBoard.com](http://HealthCareTraveler-JobBoard.com)). If all criteria are met, the Applicant Profile will be deemed valid

2. Purchase Price

When utilizing Applicant Profile services from HealthCareTraveler-Jobs.com website, the Agency will accept the

a. Profiles per selection(s) for the sum of:

Category 1 - Advanced Practice Nurse Profile Selections (\$17.00 USD) per profile

Category 2 - Registered Nurse Profile Selections (\$15.00 USD) per profile

Category 3 - Therapist Profile Selections (\$17.00 USD) per profile

Category 4 - Profile Selections (\$17.00 USD) per profile

Category 5 - Allied Health Profile Selections (\$10.00 USD) per profile

Discounted Rate: All RN Specialties Selected Category 2, with All States selected.

All Discipline and Specialty selections reduced to (\$10.00 USD) per profile

per received Applicant Profile delivered to agency.

## HCEN's HealthCare Applicant Profile Service Agreement (Continued)

b. Invoices for Applicant Profiles received are billed bi-weekly and sent via electronically via e-mail and payment is due upon receipt of invoice. Invoice payment paid by check or online through HealthCare Employment Network,LLC payment gateway. Checks will be made payable to HealthCare Employment Network,LLC

(i) Late payment of 15 days past invoice date will be charged an additional 1 % of the total invoice. Late payment of 30 days past invoice date will be charged 2% of the total invoice for each month the invoice remains past due. Agency accounts 30 days past due will be subject to suspension of agency account until account is paid in full.

### 3. Delivery of Applicant Profiles

The Applicant Profile will be deemed received by the Agency when delivered to the Agency by email and invoice transmitted to Agency. When confirmation of receipt by Agency of live test is confirmed; all Applicant Profiles following live test confirmation will be deemed received by Agency, and any Agency email filtering, that results in non delivery of Applicant Profile is Agency's responsibility and still deemed valid in delivery.

### 4. Warranties

THE APPLICANT PROFILES ARE SOLD "AS IS", AND THE SELLER EXPRESSLY DISCLAIMS ALL WARRANTIES, WHETHER EXPRESSED OR IMPLIED, INCLUDING, BUT NOT LIMITED TO, ANY IMPLIED WARRANTY FOR PARTICULAR PURPOSE, HealthCare Employment Network, LLC. or its affiliate sites does not assume, or authorize any other person to assume on the behalf of HealthCare Employment Network, LLC. or its affiliate sites, any connection with the sale of the APPLICANT PROFILES, except as it pertains to their conformance with all laws, rules and regulations applicable to it.

### 5. Agency Cancellation

Agency has the right to cancel this agreement at any time by email notice to [Admin@HealthCareTraveler.US](mailto:Admin@HealthCareTraveler.US)

### 6. Cancellation

HealthCare Employment Network, LLC. reserves the right to cancel this agreement

- a. if the agency fails to pay for any invoice when due;
- b. in the event of the Agency's insolvency or bankruptcy; or
- c. if HealthCare Employment Network, LLC. deems that its prospect of payment is impaired.

### 7. Misrepresentation

Any person signing up to receive Applicant Profiles from HealthCare Employment Network must be an employee of the Agency stated at the time of signup. Misuse of representation as an employer will deem you personally and legally responsible for all fees incurred as a result of such misrepresentation.

### 8. Legal

All claims and disputes arising under or relating to this Agreement are to be settled by binding arbitration in the State of Arkansas. The appointment of a single Arbitrator or Arbitration firm will be agreed upon by both parties and both parties will be equally financially responsible for the cost of arbitration.

### 9. General Provisions

Headings are inserted for convenience only and are not to be considered when interpreting this Agreement. Words in the singular or vice versa. Words in the masculine mean and include the feminine and vice versa.

- a. This agreement cannot be modified in any way except in writing signed by both parties to this Agreement.
- b. This Agreement will be governed by by and construed in accordance with the laws of the state of Arkansas, and HealthCare Employment Network, LLC. and the Purchaser hereby agree to jurisdiction of the State of Arkansas, in Pulaski County.

HealthCare Professional Applicant Profile Agreement (Continued)

- c. Except where otherwise stated in this Agreement, all terms employed in this Agreement will have the same definition as set forth in the Uniform Commercial Code in effect in the State of Arkansas on the date of execution of this Agreement.
d. If any clause of this Agreement is held unconscionable by any court of competent jurisdiction, arbitration panel, or other official finder off act, the clause will be deleted from this Agreement and the balance of this Agreement will remain in full force and effect.
e. Each party shall be responsible for and shall conduct itself according to all applicable federal, state and local laws and regulations that apply to its operations.

This Agreement constitutes the entire agreement between the parties, and there are no further items or provisions, either oral or otherwise. The Purchaser acknowledges that it has not relied upon any representations of HealthCare Employment Network, LLC. as to prospective performance of the Profiles, but has relied upon its own investigation of subject matter.

Agency Designate Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By typing your name on the signature line, you are signing this agreement electronically. You agree that your electronic signature is the legal equivalent of your manual signature on this agreement.

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

Procedure for Saving Form - 1. Print form to PDF, 2. Name Saved File, 3. Either attach file to an email or print and fax to 866-553-3618 email to Admin@HealthCareTraveler.US

If your agency is already a client with one of HCEN's other services there is no need to complete the following information on the next page.

Please check service (s) provided

- HCEN Applicant Profile Service Client HCEN Candidate Lead Service Client HCEN Travel Assignment Job Board Client

Also included with your Applicant Profile agreement is the placement of a 160 px x 90 px Agency logo which will be included on the vertical scroll bar of HealthCareTraveler-Jobs.com and HealthCareTraveler-Lounge.com which is located on hundreds of pages throughout the sites.

Staffing agency logos are directly linked to your staffing agency website home page.

Please send a 160 px x 90 px .jpeg logo image for inclusion to:

Admin@HealthcareTraveler.US

If you would like our assistance in designing or retrieving the agency logo at no charge, please email us

It takes 24-48 hours for your request to be processed and become live on the site.

## Agency Information

Agency Name: \_\_\_\_\_ Date: \_\_\_\_\_

Agency Address: \_\_\_\_\_

PO Box: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Agency Main Phone #: \_\_\_\_\_

Agency Website URL: \_\_\_\_\_

Primary Agency Contact: \_\_\_\_\_

\_\_\_\_\_ Title: \_\_\_\_\_

Primary Contact Phone #: \_\_\_\_\_

\_\_\_\_\_ Extension: \_\_\_\_\_

Primary Contact Fax #: \_\_\_\_\_

Primary Contact Email: \_\_\_\_\_

Billing Address is same as above

Billing Address: \_\_\_\_\_

PO Box: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Accounting Contact: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

\_\_\_\_\_ Extension: \_\_\_\_\_

Primary Contact Fax #: \_\_\_\_\_

Primary Contact Email: \_\_\_\_\_

PO Number if required: \_\_\_\_\_