9/27/23, 8:40 PM Candidate Detail

MY ACCOUNT

| Summary                                 | Detail     | inDepth | Updates          | ATS        | Campaign                 | s CRM                          | Emails     |           |
|---|------------|---------|------------------|------------|--------------------------|--------------------------------|------------|-----------|
| Len Sulliva<br>Physician A<br>Antsdmb@g | ssistant - |         | Medicine         |            |                          |                                | ID#:       | 843391    |
| N/A<br>Austin, TX 78722                 |            |         | Mobile<br>Phone: | , ,        |                          | Date<br>Available:             | 11/2023    |           |
|   |            |         | Home<br>Phone:   | No:<br>Pro |                          | Date<br>Submitted:             | 9/12/2     | 2023      |
|   |            |         | Work<br>Phone:   | No:<br>Pro |                          | Date<br>Updated:               | 9/12/2     | 2023      |
| Client Ir                               | nformatio  | n       |                  |            |                          |                                |            |           |
| Descrip                                 | tion:      |         |                  |            |                          |                                |            |           |
| Professiona                             | ıl Informa | tion    |                  |            |                          |                                |            |           |
| Professiona                             | l Status:  |         | Privat           | e Practi   | ce                       |                                |            |           |
| Board Statu                             | ıs:        |         | Board            | Certifie   | ed                       |                                |            |           |
| Authorized<br>Employer ir               |            | -       | U.S. C           | itizen     |                          |                                |            |           |
| State Licens                            | se:        |         | TX               |            |                          |                                |            |           |
| School:                                 |            |         |                  |            | ersity of Neb            |                                |            |           |
| Internship:                             |            |         |                  |            | ha, Nebraski<br>Provided | a, United Sta                  | tes (2001) | )         |
| Residency:                              |            |         |                  |            | Provided                 |                                |            |           |
| Fellowship:                             |            |         |                  |            | Provided                 |                                |            |           |
| Professiona                             | l Interest | s:      |                  |            | ician Assista            | nt - Emerger                   | ıcy Medici | ine       |
| Personal In                             | formation  | ı       |                  |            |                          |                                |            |           |
| Type of Con                             | nmunity:   | No Pi   | reference        |            |                          |                                |            |           |
| Significant (                           | Other:     | Not P   | Provided         |            |                          |                                |            |           |
| Gender:                                 |            | Male    |                  |            |                          |                                |            |           |
| Specific Geo<br>Preference:             |            | Not P   | Provided         |            |                          |                                |            |           |
| Language:                               |            | Not P   | Provided         |            |                          |                                |            |           |
| Home State                              | ::         |         |                  |            | Texas                    |                                |            |           |
| Sig. Other C                            | ccupatio   | n:      |                  |            | Not Provid               | ed                             |            |           |
| Geographic                              | Preferen   | ce:     |                  |            |                          | IN, IL, ID, ME<br>(, UT, WA, W |            | MT, NE, N |
|   | terests:   |         |                  |            | Not Provid               |                                |            |           |