



APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, veteran status, marital status, sexual orientation, disability, national origin or any other classes protected by law.

PERSONAL INFORMATION

Date _____ Referred By: _____

Name _____

Last First Middle

Street Address _____

Street City State Zip

Mailing Address _____

Street City State Zip

Phone Number _____

Home Cell

Applicant's Email Address: _____

EMPLOYMENT DESIRED

Current EMS Certification: EMT EMT-I EMT-P Amount of time in current certification: _____

Full Time Part Time Per Diem (check all that apply) Date you can start Salary Desired

Are you employed now? Yes No If so, may we inquire of your present employer? Yes No

Ever applied to this company before? Yes No Where? When?

EDUCATION

Name and Location of School Circle Last Year Completed Did You Graduate? Subject Studied and Degree(s) Received

Grammar School		1 2 3 4	Yes	
			No	
High School		1 2 3 4	Yes	
			No	
College		1 2 3 4	Yes	
			No	
Trade, Business or Correspondence School		1 2 3 4	Yes	
			No	

GENERAL

Desired Location to Work _____

Job Related Skills (typing, CDL driver's license, etc.) _____

Activities Other Than Religious (Civic, Athletic, etc.) _____

EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, SEX, COLOR OR NATIONAL ORIGIN OF ITS MEMBERS.

(Continued on Other Side)



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FORMER EMPLOYERS

List below your last *four* employers, starting with the *most recent first*.

Date/Month/Year	Name and Address of Employer	Salary (upon leaving)	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

REFERENCES

List below three persons not related to you, whom you have known at least one year.

Name/Title	Address	Phone Number	Years Acquainted
1			
2			
3			

"It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability."

If you are to be hired by the company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check which may include but not limited to a criminal history, driving history, and credit history check. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at-will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either the Company or myself. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

If offered employment, I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and test, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired, a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies and procedures. The Company retains the right to revise its policies and procedures, in whole or in part, at any time.

Date

Signature