

# APPLICATION FOR EMPLOYMENT

#### AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

South Central EMS is an Equal Opportunity Employer and complies with all laws enforced by The Equal Employment Opportunity Commission (EEOC). The EEOC enforces the following federal laws: Title VII of the Civil Rights Act of 1964 (Title VII), the Age Discrimination in Employment Act (ADEA), the Equal Pay Act (EPA), and the Americans with Disabilities Act (ADA). These laws prohibit employment discrimination based on race, color, sex, religion, national origin, age, disability or in retaliation for opposing job discrimination, filing a charge or participating in proceedings under the laws. All qualified candidates will be considered for employment in accordance with these laws.

# **GENERAL INFORMATION**

Name (Last)	(First)			(Middle Initial)	Home Telephone
Address (Mailing Address)	(City)		(State)	(Zip)	Other Telephone
E-Mail Address		Are you legally entitled to work in the U.S.?  Yes  No			
Race / Ethnic Group (Voluntary)         White       Black       Hispanic       American Indian / Alaskan Native         Asian / Pacific Islander       Other	can Indian / Alaskan Native				] Website

# POSITION

Position Applying			Date Available
Are you willing to travel?	Are you willing to work overtime?  Yes No	Are you 18 years of age or older?	Yes 🔲 No
Have you ever been employed by South Centr	al EMS? 🗌 Yes 🔲 No	If yes, when?	

# **EDUCATION AND TRAINING**

	Name and Location	Degree	Did you Graduate?	Year Graduated
High School			🗌 Yes 🗌 No	
College / Technical			🗌 Yes 🗌 No	

# **VETERAN INFORMATION (Most recent)**

Branch of Service	Date of Entry	Date of Discharge
Rank/Rate at Discharge	Type of Service	Type of Discharge

## EMPLOYMENT HISTORY (Most recent)

Employer					
Address					
Job Title	Job Title				
From/To (Month/Year)	Supervisor's Name	Telephone Number			
Reason For Leaving					
May We Contact This Employer?  Yes No					
Employer					
Address					
Job Title					
From/To (Month/Year)	Supervisor's Name	Telephone Number			
Reason For Leaving					
May We Contact This Employer?  Yes No					

Employer			
Address			
Job Title			
From/To (Month/Year)	Supervisor's Name	Telephone Number	
Reason For Leaving			
May We Contact This Employer?  Yes No			

### Reference

Name	Address	Telephone Number		

## **General Information**

Have you been convicted of any criminal violations of the law? (Anything after your 18th birthday)	🗌 Yes 🗌 No	(explain)
Do you have a valid driver's license	🗌 Yes 🗌 No	What class is your license?
Do you have your own reliable transportation?	🗌 Yes 🗌 No	

I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for dismissal.

Signature of Applicant

Date \_\_\_\_\_

#### Zero-Tolerance Substance Abuse

It is the policy of South Central EMS to maintain a workplace free of alcohol and illegal drugs and their effects. Employees are required to report to work and perform work throughout the day fit for duty. South Central EMS has a zero-tolerance policy – any employee who is found to be using, in possession of, or under the influence of those substances while working will be subject to disciplinary action up to and including termination.

No employee shall be permitted to work if he/she is under the influence of a substance that prevents him/her from safely performing the duties to his/her job.

South Central EMS does not allow employees to either possess or use medical marijuana while at work. No employee shall work while under the influence of medical marijuana. Any employee who uses or possesses medical marijuana at work will be subject to disciplinary action.

Any employee, who is taking medication (including prescription medication, over-the-counter medications, or medical marijuana) that may have an impact on their ability to work safely, must notify their supervisor prior to starting work. In this circumstance it may be necessary to obtain a medical opinion regarding the employee's fitness for duty.

#### Applicant's Certification and Agreement

- The distribution or receiving of this application by South Central EMS does not imply or intend to imply an agreement or contract to employ the applicant. The purpose of this application is solely to allow persons a standardized form on which to submit their qualifications. This application will be considered valid for no longer than one year. Re-application is necessary after one year.
- I authorize all persons, schools, employers, and organizations mentioned in this application to provide South Central EMS with any and all information requested by South Central EMS and I voluntarily release such persons, schools, employers, and organizations from all liability for providing such information.
- In the event I am employed by South Central EMS, I agree to comply with all its rules, regulations, and directives. I understand that my employment is for no stated term and is subject to termination at the will of South Central EMS.
- I certify that all statements made by me during the application process are true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would
  affect this application unfavorably. I understand that falsification, misrepresentation, or omission of facts called for in this application may result in denial of employment or immediate
  dismissal. I hereby acknowledge that I have read, understand, and consent to the above statements.
- I also understand that if offered employment, I must prove my identity and my eligibility to work in the United States, prior to being employed.
- I also understand that any offer of employment is contingent upon my completion of South Central EMS's evaluation of a post-offer physical examination.