

# NorthWest EMS Employment Application

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**NorthWest EMS** is an Equal Opportunity Employer. All applicants are considered for positions without regard to race, creed, color, religion, sex, sexual orientation, national origin, age, qualified disability or handicap, or veteran status.

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Please follow these instructions when completing this application:

1. Please print legibly in ink.
2. This application must be fully completed. A resume may be included, however, it will not substitute for this application or any section within this application. Any incomplete applications will not be considered.
3. Photocopies of the following documents must be included with this application. Failure to include the minimum documents will automatically reject your application.

**Emergency Medical Technicians:**

BCLS Certification  
EMT Certification  
EVOC Certification

**Paramedics:**

BCLS Certification  
EMT-P Certification  
ACLS Certification  
PALS Certification  
PH or BTLS Certification  
EVOC Certification



I certify that the statements made on this application and any supplements are true and correct to the best of my knowledge and belief. I authorize **NorthWest EMS** to verify such answers and investigate all references. I understand that any false statements on this application or supplements to it may be considered sufficient cause for rejection of this application, or for dismissal, if detected subsequent to my employment. I further understand that my employment and compensation can be terminated, at will, with or without cause, and with or without notice, at any time, either at my option, or the option of **NorthWest EMS**.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Application Received: \_\_\_\_\_

Reference Check: \_\_\_\_\_

Applicant Contacted: \_\_\_\_\_

Hire Date: \_\_\_\_\_

Applicant Interviewed: \_\_\_\_\_

Pay Rate: \_\_\_\_\_

By Whom: \_\_\_\_\_

Start Date: \_\_\_\_\_

**PERSONAL DATA**

Legal Name: Last, First, Middle Initial		Maiden
Street Address		
City	State	Zip Code
Home Telephone (     )	Alternate Telephone (     )	Social Security Number
Position Desired		
Are you seeking: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time     If Part Time, Hours Available per Week: _____		
Have you ever been convicted of a felony or a misdemeanor? If YES, please describe in detail on the back of this page. <input type="checkbox"/> YES <input type="checkbox"/> NO <i>A YES answer will not necessarily disqualify you from consideration for this position.</i>		

**EDUCATIONAL BACKGROUND**

Do you possess either a High School Diploma or G.E.D.? <input type="checkbox"/> YES <input type="checkbox"/> NO					
Dates: Month/Year		Schools	Name and Address	Graduated	Course or Major
From	To	High School			
From	To	College or University			
From	To	Technical School			
From	To	Other			
Special Skills and/or Training (Include Instructor Certifications or Rescue Courses and provide copies of such).					

**EMPLOYMENT HISTORY**

Please list all employers and duties beginning with the most recent (include military training, if applicable). Utilize additional space on the back if needed. Explain any gaps of more than 30 days.			
From	Name of Employer		Supervisor
To	Street Address	City	State Zip Code
Phone ( )		Position	
Duties			
Reason for Leaving		Salary or per hour rate	
From	Name of Employer		Supervisor
To	Street Address	City	State Zip Code
Phone ( )		Position	
Duties			
Reason for Leaving		Salary or per hour rate	
From	Name of Employer		Supervisor
To	Street Address	City	State Zip Code
Phone ( )		Position	
Duties			
Reason for Leaving		Salary or per hour rate	

Please attach any supplemental information you may feel **NorthWest EMS** should consider when evaluating this application. Also, please be aware that **NorthWest EMS** may contact any previous employers or supervisors listed unless specifically requested not to do so.