



# GREEN LAKE TOWNSHIP EMERGENCY SERVICES EMPLOYMENT APPLICATION

## PERSONAL INFORMATION

LAST NAME:		FIRST NAME:		MIDDLE INITIAL:	NICKNAME/OTHER NAMES USED:
STREET ADDRESS:			CITY/STATE:		ZIP:
TELEPHONE:		SOCIAL SECURITY NUMBER:		BIRTHDATE:	
CELL: ( ) -		- -		/ /	
HOME: ( ) -		LEGALLY ABLE TO WORK IN U.S.?		<input type="checkbox"/> YES <input type="checkbox"/> NO	
EMPLOYMENT DESIRED:		DRIVER'S LICENSE:			
<input type="checkbox"/> EMS <input type="checkbox"/> FIRE <input type="checkbox"/> FIRE & EMS		STATE ISSUED:			

## EDUCATION

SCHOOL	MAJOR	DEGREE/DATES OF ATTENDANCE (ANY PENDING CHANGES)

CERTIFICATIONS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HONORS/AWARDS:

SPECIAL SKILLS (TRANSLATION, SIGN LANGUAGE, ETC)

## WORK EXPERIENCE

COMPANY	ADDRESS	SUPERVISOR	TELEPHONE	JOB TITLE	REASON FOR LEAVING

## REFERENCES

NAME	RELATIONSHIP	ADDRESS	PHONE

<b>DRIVING RECORD</b>		
In the past 5 years have you had your driver's license revoked or suspended	<input type="checkbox"/> yes	<input type="checkbox"/> no
In the past 5 years have you been convicted of reckless driving	<input type="checkbox"/> yes	<input type="checkbox"/> no
In the past 3 years have you been convicted of more than 2 driving violations	<input type="checkbox"/> yes	<input type="checkbox"/> no
In the past 3 years have you been determined to be at fault in a vehicle accident	<input type="checkbox"/> yes	<input type="checkbox"/> no

<b>CRIMINAL HISTORY</b>	
MISDEMEANOR: _____	DATE: _____
_____	
FELONY: _____	DATE: _____
_____	

**I CERTIFY THAT THE ABOVE IS TRUE TO THE BEST OF MY KNOWLEDGE AT THE TIME OF APPLICATION. I ALSO AGREE TO PROVIDE COPIES OF ALL LICENSES AND CERTIFICATES. I ALSO AUTHORIZE GREEN LAKE TOWNSHIP EMERGENCY SERVICES TO RUN A BACKGROUND CHECK, INCLUDING DRIVING RECORD, WITH MY SIGNATURE BELOW.**

<b>X</b>	
<b>SIGNATURE</b>	<b>DATE</b>

**State your interest in Green Lake Township EMS (what prompted your application to our service):**

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