

Application for Employment

Williamsport Volunteer Fire & EMS Company

2 Brandy Drive
Williamsport, Maryland 21795
301-223-9500 - Fax: 301-223-6122

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related physical or mental handicap.

PLEASE PRINT

Date of Application: _____

Position(s) Applied For: _____

Name _____ Social Security _____
LAST FIRST MIDDLE Number

Address _____
NUMBER STREET CITY STATE ZIP CODE

Telephone (_____) _____ Cell Number (_____) _____ Date of Birth _____

Height _____ Weight _____ Date of Last Physical Exam. _____

Do you feel that you can perform all the functions related to the job? YES NO

If not, specify _____

Are you willing to take a Physical Exam? YES NO

Are you willing to undergo an alcohol and/or drug test? YES NO

Have you filed an application here before? YES NO If YES, give date _____

Have you ever been employed here before? YES NO If YES, give date _____

Have you ever been convicted of a crime? YES NO If YES, give date _____

For which department? _____

Are you a veteran? YES NO Branch of Service _____ From _____ To _____

Are you a member of the reserves or the National Guard? YES NO

Branch of Service _____ From _____ To _____ Rank _____

EDUCATION

	Elementary	High School	College/University	Graduate/ Professional
School Name				
Years Completed (Please Circle)	4 5 6 7 8	9 10 11 12		
Diploma/Degree				
Describe Course of Study				
Describe all Specialized Training, etc.				

*Attached all Training to this application.

If you did not graduate from high school, have you passed an examination and received a high school equivalency certificate from Maryland or any other State? YES NO

Name of State granting certificate of equivalency _____ Date Issued _____

CLERICAL SKILLS

Accounting Bookkeeping Computer Operation Word Processing EMAIS

Driver's License Number _____ Class _____ State if Issue _____ Date of Expiration _____

Do you currently have any active motor vehicle "points" on your driving record? YES NO

If YES, how many? _____ ATTACH A COPY OF YOUR DRIVING RECORD

Give a brief statement in your own handwriting of why you would like to work for Williamsport Volunteer Fire & EMS Company. _____

Signature of Applicant _____

Date _____

EMPLOYMENT RELATED INFORMATION

Instructions: The below listed employment related information must be completed by all applicants. Failure to complete this information truthfully may result in disqualification from consideration for employment. Applicant may attach additional sheets if necessary.

- 1. How many times did you miss work last year? What were the reasons?**
- 2. If you had disciplinary actions taken against you by any previous employer, please describe the facts and circumstances.**
- 3. Have you ever been discharged (fired) from a job? If yes, please explain details.**

I acknowledge that my employment is “at will” and that the Williamsport Volunteer Fire & EMS Company reserves the right to terminate me at any time with or without cause and with or without notice.

Applicants Signature

Date

I consent to taking an employment physical examination to include an alcohol and drug screen and such future physical examinations as may be required by the Williamsport Volunteer Fire & EMS Company.

I authorize the Williamsport Volunteer Fire & EMS Company to contact my previous employers, if necessary, and obtain employment information from them, and to further investigate the truthfulness of my application.

I understand further that any false answers or statements or misleading omissions made by me on this application, can be sufficient grounds for my rejection or discharge.

Applicants Signature

Date