



CARROLL TOWNSHIP EMS & FIRE DEPARTMENT
11080 W. Toussaint East Road Oak Harbor, Ohio 43449
PHONE: (419) 898-9621 JOHN BROUGH FAX: (419) 898-0366
Fire Chief



APPLICATION FOR PART-TIME EMS EMPLOYMENT

Carroll Township is an equal opportunity employer. No applicant will be excluded from consideration on a basis prohibited by federal, state, or local law.

Name: _____ Address: _____

Phone: _____ Email: _____

Current Ohio EMS EDUCATION AND TRAINING

Current Certification Level: _____ EMT _____ Advanced EMT _____ Paramedic

Ohio Certification Number: _____ Expires: _____ Years at current level: _____

ADDITIONAL CREDENTIALS You must currently hold an EMT, Advanced EMT, or Paramedic, and CPR credentials in order to be considered. *Provide copies of your certificates (front and back).*

CPR (BLS) ACLS PALS National Registry #: _____

Expires: _____ Expires: _____ Expires: _____ Expires: _____

Firefighter level 1A / I / II HAZMAT: OPS / TECH OTHER: _____

Expires: _____ Expires: _____ Expires: _____

CRIMINAL HISTORY

Have you ever been convicted by any court of a felony or misdemeanor? _____ Yes _____ No

If yes, provide an attached explanation of the circumstances. A conviction does not necessarily disqualify you from employment.

DRIVING HISTORY

Do you have a valid State of Ohio Driver License? ___ No ___ Yes DL#: _____ Expires: _____

Has your Driver's License ever been suspended or revoked? _____ Yes _____ No

Have you been involved in any traffic accidents in which you were cited? _____ Yes _____ No

FORMAL EDUCATION (For each category below, circle the highest educational level you have completed.)

High School _____ 9 10 11 12 Did you graduate? Yes / No
School name, city and state Circle highest year completed

College _____ 1 2 3 4 Did you graduate? Yes / No
College name, city and state Circle highest year completed

Major: _____ Minor: _____ Highest degree earned: _____

EMPLOYMENT HISTORY In the space below, provide a complete record of your employment, beginning with your present or most recent job. Account for all periods in the last seven years, including self-employment and unemployment. Use extra paper if necessary.

Employer: _____
Company name Company address Company Phone #

Your Job Title _____ Dates _____ From (MM/DD/YYYY) _____ To (MM/DD/YYYY)

Supervisor and Title _____ Reason for Leaving _____

DUTIES _____

May we contact for a reference? Yes / No



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REFERENCES (excluding relatives and employers) List name, address, and daytime phone number:

1. _____

2. _____

I hereby submit this application for part-time employment with the Carroll Township EMS & Fire Department. I certify the answers herein are true and complete to the best of my knowledge. I authorize the Carroll Township EMS & Fire Department and the Carroll Township Trustees to make any investigations of my criminal, motor vehicle, and education histories or any other related affairs as maybe necessary in arriving at an employment decision. I release all persons from liabilities in responding to inquiries regarding this application. I understand discovery of false or misleading information at any time during my application process may result in termination or revocation of an employment offer. I agree to abide by the Carroll Township personnel manual, department Standard Operating Guidelines, and the Chain of Command. Should my qualifications be satisfactory, and should I accept an offer of employment, I agree to be an active member of the organization, and perform my duties to the best of my ability.

Applicant Signature: _____ Date: _____



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Fire Chief



COMPLETED
TO: CARROLL

RETURN
APPLICATION
TOWNSHIP EMS & FIRE DEPARTMENT

11080 W. TOUSSAINT EAST ROAD
OAK HARBOR, OH 43440

OFFICE USE ONLY

APPLICATION RECEIVED DATE: _____ APPLICATION RECEIVED BY: _____ COMPLETE? Y / N

ACCEPTED FOR INTERVIEW? N / Y INTERVIEW DATE: _____ HIRE DATE: _____

SEPERATION DATE: _____ SEPERATION REASON: _____