



WINDSOR EMS

PO BOX 1636
DICKINSON, TX 77539
713-661-4367



EMPLOYMENT APPLICATION

Personal Information:		Last Name		First Name		MI			
Home Phone		Cell Phone		DOB		SSN			
Address				City		State	Zip		
Emergency Contact Name				Home Phone		Work Phone			
Texas DL #		Class	List any traffic offenses in the last THREE(3) years						
Work Eligibility: Left Thumb Print		Are you eligible for work in the United States?		Y	N	Have you ever been arrested for any crime?		Y	N
		Are you 18 years of age or older?		Y	N	Have you ever been convicted of a felony?		Y	N
		Do you have a valid Texas driver's license?		Y	N	Have you ever served as a peace officer?		Y	N
		Are you available for shift work?		Y	N	Have you ever taught in a teaching institution?		Y	N
		Are you available for overtime work?		Y	N	Do you have any anti-medical religious beliefs?		Y	N
<p>Note: Arrest or conviction of a crime will not necessarily disqualify you from a position; however, lying About a prior criminal history will. Each conviction or crime will be considered on a case-by-case basis. Please explain you eligibility answers, if needed: _____</p>									
Education:				Did you graduate? Y N					
High School:				Course of study?					
Location:				Course of study?					
2-Year College:				Did you graduate? Y N		GPA?		Course of study?	
4-year College				Did you graduate? Y N		GPA?		Course of study?	
Special Skills:									
Texas EMS Certification Number:						Bilingual (written or spoken)			
Current EMS Training Level:						Computer literacy level:			
Last Date Renewed and expiration:						Mechanical knowledge:			
Other Police/Fire/EMS related training:						Type WPM			
Previous Work Experience:									
Please give an accurate and complete employment record, starting with the most recent or current position. Please include any volunteer, military, education, or gaps in work history. Note: We will check references.									
Last/current position:				Company Name:				Main Phone Number:	
Company Address:						Supervisor Name:			
Position Held:				Employed from: / / -- / /					

May we contact this employer?	If not, why not? _____
Describe your work:	
Reason for leaving:	
Position 2	
Company Name:	Main Phone Number:
Company Address:	Supervisor Name:
Position Held:	Employed from: / / -- / /
May we contact this employer?	If not, why not? _____
Describe your work:	
Reason for leaving:	
Position 3	
Company Name:	Main Phone Number:
Company Address:	Supervisor Name:
Position Held:	Employed from: / / -- / /
May we contact this employer?	If not, why not? _____
Describe your work:	
Reason for leaving:	
Position 4	
Company Name:	Main Phone Number:
Company Address:	Supervisor Name:
Position Held:	Employed from: / / -- / /
May we contact this employer?	If not, why not? _____
Describe your work:	
Reason for leaving:	
Personal Reference #1:	Personal Reference #2:
Name:	Name:
Phone:	Phone:
Years Known:	Years Known:

PLEASE READ CAREFULLY

In exchange for the consideration of my job application by Windsor EMS, I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Windsor EMS, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a 105 message signed by the business office of Windsor EMS. Both the undersigned and Windsor EMS may end the employment relationship at any time, without specified notice or reason. If employed, I understand that Windsor EMS may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Windsor EMS permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release Windsor EMS from any liability as a result of such contract.

I also understand that (1) Windsor EMS has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, Windsor EMS may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, Windsor EMS will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with Windsor EMS shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with Windsor EMS is terminable at will for any reason by either party.

I understand that Windsor EMS does not subscribe to Workmen's Compensation. Windsor EMS does carry a supplemental accidental policy, which does provide compensation of salary and insurance protection. I understand that if a physician places me on light duty, Windsor EMS will not be required to provide light duty to me. I understand that Windsor EMS will not tolerate sexual or any other form of unlawful harassment. I understand that I have the affirmative obligation to report it. I also understand that unlawful harassment is grounds of disciplinary action up to and including immediate dismissal.

Please print your name _____

Signature of applicant _____ **Date:** _____

Windsor EMS is an equal employment opportunity employer. We adhere to a policy of making employment Decision's without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Windsor EMS depends solely on your qualifications. Thank you for completing this application form and for your interest in Windsor EMS. Your application for employment will be maintained in our Human Resources Department for six (6) months.

Signature:

Date:

/ /

Print Name: