

Warrington Ambulance

1140 Easton Road
PO Box 787
Warrington, PA 18976
215.343.3469 - Phone
215.491.0654 - Fax

APPLICATION FOR EMPLOYMENT

Warrington Ambulance is an equal opportunity employer

PERSONAL INFORMATION

Name (Last, First, Middle):

Date:

Social Security Number:

Home Address:

City:

State:

Zip:

Home Phone:

Pager/Cell Phone:

Can you prove your U.S. Citizenship? Circle one:

Yes

No

If not a U.S. Citizen, give Visa No. and Expiration Date:

Position You Are Applying For:

Type of Employment Desired: Full-time Part-time PRN

Salary Requirement:

Referred by:

Date You Can Start:

Have you ever been Employed here Before:

If Yes Give Dates:

EDUCATION RECORD

High School (Name, City, State):

Graduation Date:

Business or Technical School (Name, City, State):

Dates Attended:

Degree Earned:

Undergraduate College (Name, City, State):

Dates Attended:

Degree, Major:

Graduate School (Name, City, State):

Dates Attended:

Degree, Subject:

WORK HISTORY (GIVE INFORMATION ABOUT YOUR LAST 3 JOBS, STARTING WITH THE MOST RECENT)

1-Employer

Dates Employed:

Address:

City:

State:

Zip:

Phone:

Ending Salary:

Title/Duties:

Manager's Name and Title:

Reason for Leaving:

2-Employer

Dates Employed:

Address:

City:

State:

Zip:

Phone:

Ending Salary:

Title/Duties:

Manager's Name and Title:

Reason for Leaving:

3-Employer

Dates Employed:

Address:

City:

State:

Zip:

Phone:

Ending Salary:

Title/Duties:

Manager's Name and Title:

Reason for Leaving:

REFERENCES:

1-Name:

Phone:

Year Known:

2-Name:

Phone:

Year Known:

REFERENCES (CONTINUED):

3-Name:

Phone:

Year Known:

Skills and Qualifications Pertinent to the Position you are Applying For:

Driver's License Number:

State of Issuance & Expiration:

Have you been convicted of a crime in the last (7) years:

If yes, please explain:

(Conviction will NOT necessarily be a bar to employment)

PLEASE READ AND SIGN

I do hereby authorize any investigative officer of Warrington Community Ambulance Corps or the Warrington Township Police Department to have released to him/her any and all information they deem necessary concerning my background. These may include, but are not limited to: school transcripts, previous employment records, medical records, adult and juvenile arrests and/or contacts with police departments and driving records in reference to my becoming an employee with the Warrington Community Ambulance Corps. The above application has been read and the statements are true and correct to the best of my knowledge.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on basis prohibited by local, state or federal law.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I understand that any misrepresentation or false statements or omissions of facts may be cause for immediate dismissal or rejection of the application.

Signature:

Date:

Criminal Background Check & Child Abuse Clearance

Any candidate for membership of Warrington Community Ambulance Corps is required to have a Criminal Background Check done before an interview will be granted. The website listed below will assist you in completing your background check. This is a \$10 fee that is paid by **YOU** and is non-refundable. Based on the results, Warrington Community Ambulance Corps reserves the right to reject your application.

<https://epatch.state.pa.us>

<http://www.dpw.state.pa.us/findaform/childabusehistoryclearanceforms/index.htm>

You will need to click on submit a new record search and agree to the terms before continuing.

****ANY APPLICATION THAT IS RECEIVED WITHOUT A BACKGROUND CHECK
WILL NOT BE ACCEPTED AND AN INTERVIEW WILL NOT BE GRANTED****