



# SUPERIOR AMBULANCE

Proudly serving Broome County since 1964.

*"Excellence in EMS"*

## *APPLICATION FOR EMPLOYMENT*

Name \_\_\_\_\_ Date of Application \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number ( ) \_\_\_\_\_ Cell Phone / Pager \_\_\_\_\_

SSN # \_\_\_\_\_ Do you possess a valid drivers license? (Yes) (No)

Do you possess a valid CDL driver's license? (Yes) (No)

If yes, do you possess passenger endorsement? (Yes) (No)

EMT Certification # \_\_\_\_\_ Level, D \_\_\_ I \_\_\_ AEMT-CC \_\_\_ AEMT-P \_\_\_

## *Position Desired*

Full Time \_\_\_ Part Time \_\_\_ EMT \_\_\_ Dispatch \_\_\_

Date that you are first available to start work: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Please submit a copy of your current Drivers License and Conviction Stub, EMT, CPR, or any other valid certification cards or certificates.

Superior Ambulance Service, Inc.  
46 Exchange Street  
Binghamton, New York 13901  
Phone (607) 772-1456 • Fax (607) 772-8649  
superiorems.com

***Questions In General***

**Have you ever been convicted of a crime? (Yes) (No)**

**If yes please describe the nature of the offense, when, where and Disposition: \_\_\_\_\_**

---

---

---

**Have you ever been employed here before? (Yes) (No)**

**If yes please give dates of employment and reason for leaving. \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_**

**Reason for leaving. \_\_\_\_\_**

---

**Have you ever submitted an application here before? (Yes) (No) If yes when? \_\_\_/\_\_\_/\_\_\_**

**Please list any Special Training or Certificates you may possess. \_\_\_\_\_**

---

**How did you learn of our service? \_\_\_\_\_**

**Please list any friends or relatives currently employed by Superior Ambulance Service.**

---

---

---

**Have your privileges to practice as an EMT/ AEMT ever been suspended or revoked? \_\_\_**

**If yes, Please explain.**

---

---

## *Employment History*

Please list most recent employer first, along with a 5-year employment history in order of employment.

**Present or most recent employer:**

Name and address of employer, \_\_\_\_\_  
\_\_\_\_\_

Immediate supervisor: \_\_\_\_\_ May we contact Supervisor? (Yes) (No)

Describe duties or positions held: \_\_\_\_\_

Dates of employment: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Phone Number ( ) \_\_\_\_\_

Salary: \$ \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

Name and address of employer, \_\_\_\_\_  
\_\_\_\_\_

Immediate supervisor: \_\_\_\_\_ May we contact Supervisor? (Yes) (No)

Describe Duties or positions held: \_\_\_\_\_  
\_\_\_\_\_

Dates of employment: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Phone Number ( ) \_\_\_\_\_

Salary: \$ \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

Name and address of employer, \_\_\_\_\_  
\_\_\_\_\_

Immediate supervisor: \_\_\_\_\_ May we contact Supervisor? (Yes) (No)

Describe Duties or positions held: \_\_\_\_\_  
\_\_\_\_\_

Dates of employment: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Phone Number ( ) \_\_\_\_\_

Salary: \$ \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

Name and address of employer, \_\_\_\_\_  
\_\_\_\_\_

Immediate supervisor: \_\_\_\_\_ May we contact Supervisor? (Yes) (No)

Describe Duties or positions held: \_\_\_\_\_  
\_\_\_\_\_

Dates of employment: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Phone Number ( ) \_\_\_\_\_

Salary: \$\_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

Name and address of employer, \_\_\_\_\_  
\_\_\_\_\_

Immediate supervisor: \_\_\_\_\_ May we contact Supervisor? (Yes) (No)

Describe Duties or positions held: \_\_\_\_\_  
\_\_\_\_\_

Dates of employment: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Phone Number ( ) \_\_\_\_\_

Salary: \$\_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_

Please account for any "Gaps "in your Employment History: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Education & Other Training***

**Do you possess a High School Diploma or Equivalent? (Yes) (No)**

**Do you possess a College Degree? (Yes) (No)**

**If yes, please list Major (s) of study:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**List names of schools, which you attended, Course of study, and degree, or diploma (s) received:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please list training history:**

<b>Instructor:</b>	<b>Course Location</b>	<b>Level of Cert.</b>	<b>Dates of Course</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

***Volunteer Service***

**Please list current or previous affiliations with volunteer services (Fire, EMS, Other)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

---

---

---

---

---

---

***References***

Please list names, addresses and phone numbers of 3 personal references:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

***Authorization:***

**“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.**

**I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.**

**I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to may any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.”**

Date \_\_\_\_\_ Signature \_\_\_\_\_

Interviewed By \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ (DO NOT WRITE BELOW THIS LINE) \_\_\_\_\_

**REMARKS:**
