

applications@willistonfire.com

(802) 878-5622

Employment Application for Call Staff Firefighter/EMT

Applicant Information						
Full Name:		First	M.I.			
		THOU	191.1.			
Are you at least 18 years of age?						
Address: Street Address			Apartment/Unit #			
City		State	ZIP Code			
Phone:			Date Available:			
Email:			_			
Prior employment with the Town of Williston?	YES N		Are you currently employed?	YES	NO □	
If yes, when?			If yes, may we contact your current employer?			
Career Firefighter/EMT						
Are you a certified Firefighter I in the State of VT?	YES	NO	Are you a licensed EMT in the State of VT?	YES	NO	
If yes, date you were certified:	_		If yes, date you were certified:	_		
Are you a certified Firefighter II in the State of VT?			Are you a licensed AEMT in the State of VT?			
If yes, date you were certified:	_		If yes, date you were certified:	_		
Do you hold other Fire certification?			Are you a licensed Paramedic in the State of VT?			
If yes, please attach copies			If yes, date you were certified:			
Are you currently enrolled in a Fire I or II class?			Are you currently enrolled in an EMS class?			
If yes, check type:,	1/11		If yes, check type:, EMT AEMT Par Expected class end date (mm/yy):	amedi _	с	
Attach a copy of your highest Fire certification.			Attach a copy of your highest EMS certification.			
Do you have BLS Provider CPR certification? If no, do you have other CPR certification?	YES	№	Check all the EMS license(s) you hold:	_		
Attach a copy of your most recent CPR certification		NO				
Do you have a current CPAT?	YES		Please attach a copy of your CPAT Proof of co	mple	tion	

	Professional References		
Full Name:	Relationship:		
Company		_ Phone: _ ()
Address:			
Full Name:	Relationship:		
)
Address:			
Full Name:	Relationship:		
Company:		Phone: ()
Address:			
	Education		
High School: YES_NO	City:		State:
Did you graduate?			
College:	City:		State:
Did you graduate?	Degree In:		
Other:	City:		State:
YES NO Did you graduate?	Degree In:		
	Military Service		
Branch:	Fro	om:	То:
Rank at Discharge:			

If applicable, please list any military training and/or experience relevant to the position you are applying for:

Employment					
Company:			Phone:	()	
Address:					
Job Title:					
Responsibilities:					
From:	То:	Reason for Leaving:			
May we contact yo	ur supervisor for a refere	ence?			
Company:			Phone:	()	
Address:			Su	pervisor:	
Job Title:					
Responsibilities:					
From:	То:	Reason for Leaving:			
May we contact yo	ur supervisor for a refere	ence?			
Company:			Phone:	()	
Address:			Su	pervisor:	
Job Title:					
Responsibilities:					
From:	То:	Reason for Leaving:			
May we contact yo	ur supervisor for a refere	ence?	NO		
		Previous Fire & EMS I	Experience		
Department:		City:			
F Dates Served: :	From To:	Rank:			
Dept Contact:		Rank:		Phone:	
Department:	_	City:			
F Dates Served: :	-rom To:	Rank:			
Dept Contact:		Rank:		Phone:	
Department:		City:			

			•		
_	From				
Dates Served:	:	То:	Rank:		
Dept Contact:			Rank:	Phone:	

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Disclaimer and Signature

Due to the nature of the Williston Fire Department's business and the populations we serve, comprehensive background checks are conducted for all potential staff members. Applicants will not be automatically disqualified solely based upon on a negative driving or criminal history without the Town of Williston first reviewing the facts or circumstances surrounding the offense or conduct.

Have you ever been disciplined or discharged by a former employer (including volunteer positions) for any type of dishonesty, ethical misconduct, act involving moral turpitude, or violent behavior in the last fifteen (15) years?	YES	NO
Have you ever been sanctioned, excluded, or otherwise prohibited from participating in any Fire or EMS position (including volunteer), or in any program that serves a vulnerable population (i.e. the elderly, disabled, or children)?		
Do you have a current, valid driver's license and a clean driving history?		

I understand that the completion of this application or any other part of my consideration for employment establishes an obligation for the Town of Williston to hire me. If I am hired, the employment relationship will be "at will", meaning that the Town of Williston or I can terminate my employment at any time and for any reason, with or without cause and without prior notice.

I attest with my signature below that all information I have provided on this application is truthful and complete. I have not concealed any requested information. I authorize investigation of all statements contained in this application, and any related attachments, as may be necessary in arriving at an employment decision. I understand that providing false information or concealing material facts may result in denial of employment or, if already employed, immediate dismissal.

Signature:

Date:

The Town of Williston is an equal opportunity employer and does not discriminate in employment with regard to race, color, religion, sex, national origin, place of birth, citizenship status, ancestry, age, marital status, pregnancy, genetic information, physical or mental disability, HIV status, military status, veteran status, sexual orientation, gender identity, crime victim status, or other category protected by state or federal law. No question is asked on this application or during the application process for the purpose of excluding any applicant due to the aforementioned protected categories or other category protected by state or federal law.