

DeSoto Parish Emergency Medical Service

P. O. Box 863
231 EMS Circle
Mansfield, LA 71052

desotoems@bellsouth.net
office 318-872-5997
fax 318-872-5339

You must be age 21 to apply.

Application for Employment

App rec'd on _____

current 1-1-19

Please print.

Date _____

Name	_____	_____	_____
	First	Middle	Last

Address	Mailing _____	Physical _____	
	City _____	State _____	Zip _____

Social Security number _____ - _____ - _____	Race _____	Sex _____
--	------------	-----------

➤ I am applying for the position I checked below.

Fill in your National Registry and LA #:	___ Paramedic M	___ Advanced EMT A	___ EMT Basic E
--	---------------------------	------------------------------	---------------------------

fill in LA state #:	LA -	LA -	LA -
----------------------------	------	------	------

Date of birth / /	Driver's License #
Phone (home)	Type ___ Expiration date _____
Phone (cell)	*CIRCLE: personal chauffeur's commercial
cell carrier	State that issued license: _____



e-mail address	_____
-----------------------	-------

I communicate with you via e-mail. Print legibly.

➤ Have you ever received a traffic citation ? If yes, explain below.	
Date	_____
Date	_____
Date	_____

➤ Misdemeanor and felony convictions – List below.	
Date	_____
Date	_____

➤ Person to be notified in case of emergency.				
Name	Address			
Phone	City	St	Zip	

➤ **Educational Background – fill out all that applies to you.**

• High School		Address		City	State
Dates attended		Graduated ?		Completed GED	Date
from	to	yes	no	requirements	State of

• Technical School		Address		City	State
Dates attended		Graduated ?		Certification	Date
from	to	yes	no	received	Degree

• College		Address		City	State
Dates attended		Graduated ?		Certification	Date
from	to	yes	no	received	Degree

	Check here if you are currently attending college classes.
--	---

➤ **Emergency medical service experience, certifications, training, etc.**

Certification earned EMT Basic	National Registry #	Instructor
	E	
Date certified	LA Registry #	School
Years of experience	LA -	

Certification earned Advanced EMT	National Registry #	Instructor
	A	
Date certified	LA Registry #	School
Years of experience	LA -	

Certification earned Paramedic	National Registry #	Instructor
	M	
Date certified	LA Registry #	School
Years of experience	LA -	

Include copies & fill out below: **LA Ethics Certificate** and **National Incident Management System (NIMS)** certificates.

You can complete them within 90 days if you're hired if you do not have them now.

required:	put date	List others & date:	Must be current year:
NIMS 700		NIMS	LA State Ethics Certificate
NIMS 100		NIMS	Date:
NIMS 800		NIMS	This is required if you are hired by DEMS (gov't entity).
NIMS 200		NIMS	

➤ **Employment History**

Dates		Current employer information	
from	to	Name	address
Phone number		city	state

Supervisor	
Reason for leaving	

Dates		Last employer information	
from	to	Name	address
Phone number		city	state

Supervisor	
Reason for leaving	

Dates		Former employer information	
from	to	Name	address

Phone number		city	state
Supervisor			
Reason for leaving			

Does DeSoto EMS have your permission to contact your previous employers?	Check one of the following:	Yes	No
--	-----------------------------	-----	----

➤ **References:** List 2 persons (not relatives) who can give current or former information about you. **Must include phone number.**

Name	Phone	
Address	City	State
Relationship you have with this person:		

Name	Phone	
Address	City	State
Relationship you have with this person:		

<ul style="list-style-type: none"> Do you have any physical or emotional condition that might limit your performance in your job? 	Yes	No
If yes, explain:		

How were you referred to DeSoto EMS?	
--------------------------------------	--

Submit copies of the following items with your completed application.

Do not expect us to make copies for you.

Use this list to check-off each item that you are submitting:

- | | | |
|---|--|--|
| <input type="checkbox"/> National Registry card | <input type="checkbox"/> high school diploma | <input type="checkbox"/> birth certificate |
| <input type="checkbox"/> State card | <input type="checkbox"/> vo-tech diploma | <input type="checkbox"/> driver's license |
| <input type="checkbox"/> CPR (BLS) card | <input type="checkbox"/> college diploma | <input type="checkbox"/> any other certification cards |
| <input type="checkbox"/> ACLS card | <input type="checkbox"/> ethics certificate* | <input type="checkbox"/> NIMS certificates* |

Birth certificate needed for proof of citizenship and birth place since 9/11/2001.

I, (print name) _____, am applying for employment with the DeSoto Parish Ambulance Service District, dba DeSoto Parish EMS.

By signing below, I hereby authorize DeSoto Parish EMS to obtain:

- full disclosure of personal information and records pertinent to my employment
- a background check (criminal history and driving record)
- a drug screening prior to my employment

If offered employment by the hiring committee, I understand that the 3 items listed above must have “clear” results before employment is considered “official”.

All information obtained will be held confidential regardless of employment outcome.

I hereby affirm that the information provided on this application is true and complete to the best of my knowledge. I agree that falsified information or significant omissions may disqualify me from consideration for employment and may be justification for dismissal if discovered at a later date.

Date _____

Signature _____

- Your application will not be considered until **all** paperwork is received.
- Turning in this application does not guarantee an interview or employment.

Mail to P. O. Box 863 – Mansfield, LA 71052

Fax to 318-872-5339

Hand deliver to: Central Station Business Office - 231 EMS Circle in Mansfield

You may be contacted for an interview. There is no need to call to check on the status of your application. All applications are kept secure by the Hiring Committee Chairman.

For office use only:

Hiring Committee members present for interview:

Date of interview by hiring committee			1	Karl Mann, Chairman
			2	
Committee approved	Yes	No	3	
Date of hire			4	
			5	

Comments