



# NELSON COUNTY EMS

1301 Atkinson Hill Avenue  
Bardstown, KY 40004  
(502) 348-4929 fax: (502) 348-2852  
[emsdirector@nelsoncountky.gov](mailto:emsdirector@nelsoncountky.gov)



## Employment Application

Applicants are considered for employment based on knowledge, experience, license and skills without regard to race, color, religion, sex, national origin, age, marital or veteran status, or non-job related medical condition or disability.

### APPLICANT INFORMATION

Last Name		First	M.I.	Date
Street Address			Apartment/Unit #	
City		State	ZIP	
Phone		E-mail Address		
Date Available	Desired Salary		Desired Status <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	
Position Applied for <input type="checkbox"/> EMERGENCY MEDICAL TECHNICIAN <input type="checkbox"/> Advanced EMT <input type="checkbox"/> PARAMEDIC				
KBEMS Licensure or Certification Number:		NREMT Licensure or Certification Number:		
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>				
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?				
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain				

### EDUCATION

High School		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

### REFERENCES

Please list three professional references.

Full Name		Relationship
Company		Phone ( )
Address		
Full Name		Relationship
Company		Phone ( )
Address		
Full Name		Relationship
Company		Phone ( )
Address		

<b>PREVIOUS EMPLOYMENT</b>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			

<b>MILITARY SERVICE</b>	
Branch	From            To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

<b>DISCLAIMER AND SIGNATURE</b>		
<p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>I authorize investigation of all statements contained in this employment application and additional job-related background investigation may be necessary in arriving at an employment decision.</p> <p>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p> <p>I understand that neither this document nor any verbal promises made by employer or representative employee may be constituted as an employment contract.</p> <p>I understand and acknowledge that, unless otherwise defined by law, policies and procedures, or rules and regulations, any employment relationship with this organization is of an "at-will" nature, which means that either the employee or employer may terminate the employment relationship at any time, with or without cause or advance notice.</p> <p>I understand that this application is the property of The Nelson County EMS. This application must be signed and dated below before receiving consideration for employment.</p>		
<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Signature</td> <td style="width: 40%;">Date</td> </tr> </table>	Signature	Date
Signature	Date	