



Unicoi County Emergency Medical Services

630 Oneega Avenue Suite E ~ Erwin, TN 37650
Emergency: 911 Phone: 423-735-3315 Fax: 423-330-1347

Employment Application

Date: _____

Applicant Information

Full Name: _____ Social Security #: _____
Last First MI

Address: _____ Apartment / Unit #
Street Address

_____ City State Zip Code

Phone: _____ Email: _____

Position Applied for: _____

Date Available: _____ Desired Salary: \$ _____

Are you a citizen of the United States? Yes No

If no, are you authorized to work in the United States? Yes No

Have you ever worked for the company? Yes No If yes, when? _____

Have you ever been convicted of a felony? Yes No

If yes, please explain: _____

Education

High School: _____ Address: _____

From: _____ to _____ Did you graduate? Yes No Diploma? Yes No

College: _____ Address: _____

From: _____ to _____ Did you graduate? Yes No Degree: _____

Other: _____ Address: _____

From: _____ to _____ Did you graduate? Yes No Degree: _____

Previous Employment

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 No

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 No

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 No

Military Service

Branch: _____ From: _____ to _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, please explain: _____

References

Please list three professional references:

1. Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____
2. Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____
3. Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____