# Timmonsville Rescue Squad Application for Employment

Thank you for your interest in Timmonsville Rescue Squad. Please complete this application packet completely and return it to Timmonsville Rescue Squad. If a Board Member is available, please hand it to them, if not you may hand it to an employee who is to place it on the Chiefs desk. After reviewing your application, the Chief will be in touch with you shortly, so please ensure you put a working phone number for your contact information. Again, thank you for your interest.

Application Checklist:
☐ Copy of Driver's License, or ID
☐ Copy of any Certification, Diploma, Degree listed on application
☐ SC DHEC ID Card (If Valid)
☐ Any resume(s) (Optional)
☐ Any proof of vaccinations listed
S.C.

Timmonsville Rescue Squad
401 E. Main Street, Timmonsville, SC, 29161
Chief Donnie Windham
843-346-7640

Timmonsvillers.org

Application Updated: 2/23/22

		Date:
Positio	n Applying for:	
<ul><li>□ Driver</li><li>□ EMT-Basic</li><li>□ EMT-Advanced</li><li>□ EMT-Paramedic</li></ul>	☐ Full-Time ☐ Part-Time ☐ PRN	
Name: Last, First, Middle Initial		Date of Birth
Home Address	ONSVILIE	City
Best number fo <mark>r contact</mark>	JE SQUAD Soc	ial Security Number
Are you currently associated with any vo	olunteer Fire, EMS, or Rescue	Agency? (Y/N)
If yes, what organization(s):		
Drivers License Number		State
Have you had any driving violations of	or infractions in the past 5	years? (Y/N)
If yes, please list and explain them:	S.C.	
Have you ever been convicted in cou  If yes, please list and explain them:	_	

Company Name	Address - City, State	Phone Number
Specific Duties		
Job Title	Supervisor	Employment Dates
Reason for Leaving		
Company Name	Address - City, State	Phone Number
Specific Duties	TIMMONSVIL	LE
Job Title	Supervisor	Employment Dates
Reason for Leaving		
Company Name	Address - City, State	Phone Number
Specific Duties		
Job Title	Supervisor	Employment Dates
Reason for Leaving		
Company Name	Address - City, State	Phone Number
Specific Duties		
Job Title	Supervisor	Employment Dates
Reason for Leaving		

Please list all relevant skills and certifications related to the position you're applying for. This includes any Emergency Vehicle Training Courses, any Medical Certifications, Fire, or Rescue certifications, and any additional skills you feel like listing.

Name of Skill or Certification	Skill or Cert Level	Date of Completion and Expiration if valid
	MANONCY III	
	ESCUE SQUAI	
	> 2 <	

Please list all formal education you have received including high school, college, or technical degree.

Name of School	Degree or Cert Obtained	Date of Completion

Please provide 3 personal references. Please do not include family or previous supervisors. Also, please make sure to notify these people, as they may receive a call.

Name	Relationship How long	Good number for contact

If you have any vaccinations including, but not limited to, Hepatitis A, B, Tuberculosis, Tetanus, COVID-19, or any other vaccination, please list them below.

Vaccination Vaccination	Date Received
S.	C.

#### **AUTHORIZATION TO OBTAIN/RELEASE INFORMATION**

scue Squad to perform a
cation for employment. This
nal history, credit, schools attended,
rsonal references, professional
er, medical records, and other
nsville Rescue Squad may request
LIE
<mark>by Timmon</mark> sville Rescue Squad
on is confidential and shall not be
s.
Date:
Date: