



Hickman County EMS

106 E Swan ST
Centerville, TN 37033
Phone: (931)729-3004
Fax: (931) 729-5528
Email: ems@hickmanco.com

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Date of Birth: _____

What is the level of your TN State license? **AEMT** **PARAMEDIC** **CC-P**

What is your TN State license number? _____

Do you desire part-time or full-time employment? **Part-time** **Full-time**

Have you had a HEP B inoculation? **Yes** **No**

If not, would you like to have one at no cost to you? **Yes** **No**

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? **YES** **NO**
 Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? **YES** **NO**
 Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? **YES** **NO**
 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: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____

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, explain: _____

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: _____

Things to bring to your interview:

Driver's License:

State EMS License

Copy of your physical from EMT School

Current CPR Certification

Any CEUs or Certifications

A voided check or banking information

Social Security Card