JOB POSTING

EMPLOYMENT OPPORTUNITY
Windsor Fire Department
Emergency Medical Technician
Application Period Opens: May 28, 2020

Job Function: Participates as a member of a team for the purpose preserving life by providing emergency medical services as an ambulance attendant; provide inter-facility medical transports; perform cleaning and maintenance duties to any equipment, vehicles and to the station as necessary; perform other work related duties as assigned.

Supervision: This is a Part-Time EMT position with potential to lead to a full time job. This position is under the supervision of the Chief of the department and shall take direction from department company officers.

Duties and Responsibilities: Responds to a variety of emergency and non-emergency calls as requested by the public or other agencies as needed. This will include Inter-facility transports. Other tasks performed could include but not limited to are: Responding to structural, wildland, automotive fires, response to hazardous materials release or spills, water rescue, wilderness search and rescue for EMS standby. Provide public safety education. Operate all EMS equipment within the scope of your training certification.

Requirements: Graduation from standard high school, trade school or equivalent; must be physically fit. Must have reasonable mechanical aptitude; ability to follow written and oral instructions; possession of a current motor vehicle license; Must have at time of hire, a current State of Vermont, State of New Hampshire and National registry EMT basic licenses

Desired Training: ICS 100 and 200, Emergency Vehicle Operator Course (EVOC)

Other: Must be able to do shift work, must maintain all required certifications and physical fitness to perform duties.

Submit Application and Resume to: Chief Kevin McAllister, 29 Union Street, Windsor, VT  05089 or email to: kmcallister@windsorvt.org.
Application For Employment

TOWN OF WINDSOR
29 Union Street, Windsor, VT 05089

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

<table>
<thead>
<tr>
<th>Position(s) Applied For:</th>
<th>Date of Application:</th>
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How Did You Learn About Us?
- ☐ Advertisement
- ☐ Employment Agency
- ☐ Friend
- ☐ Relative
- ☐ Walk-In
- ☐ Other

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<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
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<tr>
<th>Address: Number</th>
<th>Street</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
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<tr>
<th>Telephone Numbers: Home:</th>
<th>Cell:</th>
<th>Social Security Number:</th>
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If you are under 18 years of age, can you provide required proof of your eligibility to work? ☐ Yes ☐ No

Have you ever filed an application with us before? ☐ Yes ☐ No

Have you ever been employed with us before? ☐ Yes ☐ No
  If Yes, give date ___________________

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Proof of citizenship or immigration status will be required upon employment. ☐ Yes ☐ No

On what date would you be available for work? ____________________________

Are you available to work: ☐ Full Time ☐ Part Time ☐ Shift Work ☐ Temporary

Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No

Can you travel if a job requires it? ☐ Yes ☐ No

Have you been convicted of a felony within the last 7 years? Conviction will not necessarily disqualify an applicant from employment. If Yes, please explain________________________________________

________________________________________

WE ARE AN EQUAL OPPORTUNITY EMPLOYER
Education

<table>
<thead>
<tr>
<th>Name and Address of School</th>
<th>Course of Study</th>
<th>Years Completed</th>
<th>Diploma / Degree</th>
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<tbody>
<tr>
<td>Elementary School</td>
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<td>High School</td>
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<td>Undergraduate / College</td>
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<td>Graduate Professional</td>
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<td>Other (Specify)</td>
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Other Languages:
SPEAK ________________________ READ ________________________
WRITE __________________________

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color; religion, gender, national origin, handicap or other protected status.

1. Employer ________________________________________________________________
   Address _______________________________ ________________________________
   Telephone Number ____________________ Job Title ___________________________
   Date Employed _______________________ Date Left ________________
   Reason for Leaving ______________________ ______________________________

2. Employer ________________________________________________________________
   Address _______________________________ ________________________________
   Telephone Number ____________________ Job Title ___________________________
   Date Employed _______________________ Date Left ________________
   Reason for Leaving ______________________ ______________________________

3. Employer ________________________________________________________________
   Address _______________________________ ________________________________
   Telephone Number ____________________ Job Title ___________________________
   Date Employed _______________________ Date Left ________________
   Reason for Leaving ______________________ ______________________________
4. Employer ____________________________________________
   Address ____________________________________________
   Telephone Number ___________________________ Job Title ____________________________________________
   Date Employed ___________________________ Date Left ___________________________
   Reason for Leaving ____________________________________________
   ____________________________________________

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.
*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:*

**Additional Information**

**Other Qualifications**

Summarize special job-related skills and qualifications acquired from employment or other experience.

**Specialized Skills**

**Check Skills/Equipment Operated**

_______Machinery (list):

Other (list):

_______Excel Spreadsheet; _______Typewriter; _______MS Word; _______Database

State any additional information you feel your application should include.

If you are applying for a job that may involve driving a municipal vehicle please answer the following:

Do you possess a valid VT Driver’s License ___ Yes ___ No

Please check License Type ___ Operators ___ CDL

Expiration Date: __________________

Note to Applicants:  **DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

Are you capable of performing the essential duties of the job for which you have applied with or without a reasonable accommodation? A description of the activities involved in such a job or occupation is attached.

___YES  ___NO
If you wish to give additional information, use the space below:

________________________________________________________________________________

________________________________________________________________________________

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicants wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant ________________________________

Date ________________________________

References:

1. _____________________________________________      _________________________________________
   (Name)                                             (Address)
   (Phone #)_______________________________________

2. _____________________________________________      _________________________________________
   (Name)                                             (Address)
   (Phone #)_______________________________________

3. _____________________________________________      _________________________________________
   (Name)                                             (Address)
   (Phone #)_______________________________________