



City of Rittman

Division of EMS

25 North State Street, Rittman Ohio 44270
Phone: (330) 925-2065 Fax: (330) 925-2058
www.rittmanems.org

The City of Rittman is an Equal Opportunity Employer

Office Use Only:
Date Received: _____
Acknowledgement Sent: _____
Interview Scheduled: Yes <input type="checkbox"/> No <input type="checkbox"/>
Given Pre-Employment Packet: Yes <input type="checkbox"/> No <input type="checkbox"/>

Employment Application

Important Information about the Application Process

- This application is to be used for both volunteer and part-time positions within the department. We strongly encourage you to provide a resume and cover letter in addition to this application.
- If you require special accommodations to participate in the application or selection process due to a disability, please contact the Chief at (330) 925-2065.
- Please answer all questions accurately and completely. Incomplete applications may be disqualified from further consideration.
- Applications are kept on file for one-year. Submission of an application does not guarantee a contract of employment.
- By signing this application, you are affirming that all of the information you provide is accurate and complete.

Applicant Information

Position for which you are applying: _____

Last Name _____ First Name _____ MI _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Cell Phone: (____) _____

Email Address: _____ Do you Text Msg.? Yes No

General Information

- Are you now, or have you ever been employed by the City of Rittman? Yes No
If yes, please list your job title, and the dates of employment _____
- Do you have any relatives employed by the City of Rittman? Yes No
If yes, please give their name and your relationship to them _____
- Please mark what type of employment you are seeking: *(Mark all that apply)*
Full-Time Part-Time Paid-on-Call Day-time Night-Time
- Are you at least 18 years of age? Yes No
- Are you able to perform the essential functions of this job, with or without reasonable accommodations? Yes No
- **Note:** *You are applying for a job in Public Safety. Certain felony and misdemeanor convictions may disqualify you from employment.*

Employment History

- In this section, describe the duties and responsibilities you have had with your previous positions; especially those which demonstrate you have the knowledge, skills, and abilities to perform the job in which you are applying. You may include internships, verifiable volunteer activities, self-employment, and military experience.
- ***Begin with your most recent job or assignment first.*** List each job separately, extending for at least the past ***10-years***. Please explain all gaps in employment.
- Additional pages of work history may be attached if necessary.
- **A resume is not a substitute for completing this section.**

May we contact this employer? Yes No Start Date: _____ End Date: _____

Employer: _____ Position: _____

Address: _____

Starting Salary: _____ Ending Salary: _____ Full-Time Part-Time

Supervisors Name and Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

May we contact this employer? Yes No Start Date: _____ End Date: _____

Employer: _____ Position: _____

Address: _____

Starting Salary: _____ Ending Salary: _____ Full-Time Part-Time

Supervisors Name and Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

May we contact this employer? Yes No Start Date: _____ End Date: _____

Employer: _____ Position: _____

Address: _____

Starting Salary: _____ Ending Salary: _____ Full-Time Part-Time

Supervisors Name and Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

May we contact this employer? Yes No Start Date: _____ End Date: _____

Employer: _____ Position: _____

Address: _____

Starting Salary: _____ Ending Salary: _____ Full-Time Part-Time

Supervisors Name and Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

May we contact this employer? Yes No Start Date: _____ End Date: _____

Employer: _____ Position: _____

Address: _____

Starting Salary: _____ Ending Salary: _____ Full-Time Part-Time

Supervisors Name and Title: _____

Duties and Responsibilities: _____

Reason for Leaving: _____

Education, Training, Certifications, & Licenses

Do you have a high school diploma, GED, or equivalent? Yes No

Colleges, Universities, Military, or Trade Schools attended			
Name of School	Location of School	Major Course of Study	Degree or Certificate Earned

Driver's License, and Professional Licensure or Certifications <i>(Please attach Copies)</i>			
License or Certificate	Number	Issuing Agency	Date of Expiration

Additional Certifications <i>(Please attach copies-one certificate per page please)</i>

CPR PALS / PEPP ACLS ITLS / PHTLS EVDT / EVOC / CEVO
 Haz-Mat/WMD Awareness Haz-Mat/WMD Operations Haz-Mat Technician
 NIMS ICS: 100 200 300 400 700 800 Blue Card

Certification of Information, Authorization & Release

BY MY SIGNATURE BELOW, I:

- **Certify** that all answers and / or information provided herein is true and complete to the best of my knowledge;
- **Authorize** investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision;
- **Release** the individual, company, institution, or organization; along with all individuals connected therewith from any or all liability incurred by giving such information. I further release the City of Rittman from liability incurred in obtaining and / or using such information;
- **Understand** that this application is not intended to be a contract for employment. 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 City of Rittman.

Signature of Applicant	Date
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