**GNWEMS APPLICATION – A Resume is Required**

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| **APPLICANT INFORMATION** |   |  |   |
| LAST NAME | FIRST NAME & MIDDLE INITIAL | SSN | DATE OF BIRTH |
|   |   |   |   |
| MAILING ADDRESS |
|   |
| PHONE 1 | PHONE 2 | EMAIL ADDRESS |
|   |   |   |
| Are you 18 or older? Y or N |   | Are you a U.S. citizen? Y or N |   |
| Military service? Y or N |   | Are you a veteran? Y or N |   |
| Do you have a Driver’s License? Y or N |  | If yes, do you have any driving restrictions? Y or N |  |
| Convicted of a felony? Y or N |   | If yes, please explain. |   |
|  |
| **POSITION AVAILABLE** |   |  |   |
| What position are you applying for?  |   |
| How did you learn of the position available?  |   |
| AVAILABLE START DATE |  |
|   |    |
| **EDUCATION** | **Quick Reference – Resume will be used for details** |
| **SCHOOL NAME** | **LOCATION** | **YEARS ATTENDED** | **MAJOR & DEGREE EARNED** |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
| OTHER / APPLICABLE TRAINING |   |
| APPLICABLE SKILLS / PROFICIENCIES |   |

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| **REFERENCES – 3 NON-RELATIVES** |    |
| **NAME** | **COMPANY & POSITION** | **RELATIONSHIP** | **PHONE** |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
| **EMPLOYMENT HISTORY** | **Quick Reference – Resume will be used for details** |
| EMPLOYER NAME  | POSITION HELD | START DATE | END DATE |
|  |   |   |   |
| MAILING ADDRESS |
|   |
| SUPERVISOR NAME | PHONE | EMAIL ADDRESS |
|   |   |   |
| REASON FOR LEAVING | ADDITIONAL INFORMATION |
|    |    |
| EMPLOYER NAME  | POSITION HELD | START DATE | END DATE |
|   |   |   |   |
| MAILING ADDRESS |
|   |
| SUPERVISOR NAME | PHONE | EMAIL ADDRESS |
|   |   |   |
| REASON FOR LEAVING | ADDITIONAL INFORMATION |
|    |    |
| EMPLOYER NAME  | POSITION HELD | START DATE | END DATE |
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| MAILING ADDRESS |
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| SUPERVISOR NAME | PHONE | EMAIL ADDRESS |
|   |   |   |
| REASON FOR LEAVING | ADDITIONAL INFORMATION |
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| **DISCLAIMER / AUTHORIZATION / LEGAL STATEMENT**  |
| Greater Northwest EMS, Inc. is an equal employment and affirmative action employer. Greater Northwest EMS, Inc. does not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, age, disability, genetic information, marital status, veteran status, sexual orientation, gender identity, creed, status with respect to public assistance, or other protected class status. Greater Northwest EMS, Inc. provides reasonable accommodation to disabled applicants and employees and takes affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to protected class status. If you believe that you have been treated in a way that does not conform to these statements, please contact our office at: 218-556-4137 or 218-556-4190. If you need a reasonable accommodation, due to a disability, or to assist with the application process, please contact our office at: 218-556-4137 or 218-556-4190.  Be advised that, if the applicant is successful in acquiring this position, the employee will be an At Will Employee. You may be requested to submit to a criminal background check if one has not been done through previous employment or the past 5 Years, whichever is the most current.  It is the responsibility of the applicant to provide factual and ruthful information through the entirety of this application.  Failure to provide truthful and accurate information on this application, phone or in-person interviews will disqualify the applicant prior to or into employment (which may include immediate termination of employment).  At the regularly scheduled June 28, 2025, Full Board meeting of the Greater Northwest EMS, Inc., the full Board motioned to open applications for the GNWEMS Director position from July 1, 2025 - 4:30 PM August 1, 2025.  Any questions can be directed to Lisa Burlage at 218-556-5137. All application submissions should be e-mailed to:  Greater Northwest EMS at: Office@greaternwems.com I have read and understand/agree to this Job Application Disclaimer as presented above. |
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| **SIGNATURE** |   |  |   |
| PRINTED NAME | SIGNATURE | DATE |
|   |   |   |