



Thousand Islands Emergency Rescue Service, Inc.
100 Union Street
Clayton, NY 13624
315-686-2058

APPLICATION

TODAY'S DATE: _____

You Are Applying For:

Employment

Volunteer Membership

Junior Membership

Position You Are Applying For: _____

YOUR NAME: _____

ADDRESS: _____

CITY, STATE ZIP: _____

HOME PHONE: _____ CELL: _____ WORK: _____

EMAIL: _____

DRIVER'S LICENSE STATE AND NUMBER: _____

ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES? ___YES ___NO

Certifications:

ISSUING AUTHORITY	TYPE	NUMBER	DATE ISSUED	EXPIRES
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Education Record

HIGH SCHOOL (NAME, CITY, STATE): _____

DID YOU GRADUATE? _____

TRADE OR TECHNICAL SCHOOL (NAME, CITY, STATE): _____

DID YOU GRADUATE? _____ CERTIFICATION OR DEGREE, SUBJECT: _____

COLLEGE (NAME, CITY, STATE): _____

DID YOU GRADUATE? _____ DEGREE, MAJOR: _____

COLLEGE (NAME, CITY, STATE): _____

DID YOU GRADUATE? _____ DEGREE, MAJOR: _____

Current Employment

CAN WE CONTACT THIS EMPLOYER? _____

EMPLOYER NAME: _____ PHONE: _____

ADDRESS: _____ WHO SHOULD WE ASK FOR? _____

CITY, STATE ZIP: _____ DATES OF EMPLOYMENT _____

YOUR POSITION/DUTIES: _____

Relevant Employment and Experience (EMS, Fire, Military Training and Experience)

Please Note: Unless specified in a job description or advertisement, no experience is required to join. We can make use of many different skills and welcome the unique contributions of each member. IF you desire to work as an ambulance crew member, we will train you. You do not have to participate in emergency medical care.

EMPLOYER/AGENCY: _____ PHONE: _____

ADDRESS: _____ WHO SHOULD WE ASK FOR? _____

CITY, STATE ZIP: _____ DATES OF EMPLOYMENT _____

YOUR POSITION/DUTIES: _____

EMPLOYER/AGENCY: _____ PHONE: _____

ADDRESS: _____ WHO SHOULD WE ASK FOR? _____

CITY, STATE ZIP: _____ DATES OF EMPLOYMENT _____

YOUR POSITION/DUTIES: _____

EMPLOYER/AGENCY: _____ PHONE: _____

ADDRESS: _____ WHO SHOULD WE ASK FOR? _____

CITY, STATE ZIP: _____ DATES OF EMPLOYMENT _____

YOUR POSITION/DUTIES: _____

Special Training and Skills that could be useful to Thousand Islands Rescue (Include Military Training). You may be asked to instruct.

THE PROCESS TO BECOME A MEMBER WILL INCLUDE:

1. YOUR APPLICATION
2. ADMINISTRATIVE REVIEW AND APPROVAL AS NEEDED
3. PHYSICAL EXAM AND IMMUNIZATIONS AS REQUIRED
4. COMPLETION OF ORIENTATION
5. PROBATION

UNIFORM SIZE INFORMATION:

SHIRT: _____ JACKET: _____

WAIST: _____ INSEAM: _____

SHOES: _____ HEIGHT: _____

Non-Discrimination Statement: TIERS Inc does not discriminate against any person on the basis of race, religion, color, gender, sexual orientation, age, national origin, disability, veteran status, family status or any other status or condition protected by law in the provision of services and in employment.

Within the Freedom of Information Law, all information contained or obtained herein will remain confidential and will be used only for membership processing.

MAKE SURE ALL INFORMATION IS CORRECT. BY SIGNING ,YOU CERTIFY THAT YOU HAVE READ THE NON-DISCRIMINATION STATEMENT AND FREEDOM OF INFORMATION STATEMENT ABOVE.

SIGNATURE: _____ DATE: _____