



TAYLOR COUNTY EMERGENCY SQUAD

P.O. Box 161 Grafton, WV 26354

797 George Washington Hwy, Grafton, WV 26354

Tele: (304)265-0904

Fax: (304)265-0906

Application for Employment

Taylor County Emergency Squad is committed to reducing bias in every aspect of the hiring process. We have long recommended a competency-driven approach to hiring. All qualified applicants will receive consideration for employment without regard to race, color, religion, gender, gender identity or expression, sexual orientation, national origin, genetics, disability, age, veteran status, or any other basis protected by law. We encourage you to apply even if your experience does not 100% match the position description; we will consider people from a variety of backgrounds and career experiences.

Ways to Apply:

Paper Application: Complete the entire application. You may attach a resume, but you must still complete all questions or your application will be deemed incomplete and may not be considered. Please fill out each box (do not just indicate “see resume”) Applications with missing or invalid job numbers will not be considered for any position.

Online Application: You may go to TCES’s website Taylorcoems.org and apply online. Go to the “Careers” or “We’re Hiring” to access the online application process. You will then be emailed an application to complete and return.

Name: _____ Position Applying for: _____

WV Cert. Number: _____ Full Time or Part Time: _____

Street Address: _____

Are you 18 years of age or older: _____

Home Phone: _____ Work Phone: _____

Email: _____

Do you have a valid driver's license, if yes please provide state of issuance, license number and expiration date:



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Have you ever been employed by TCES, if yes please provide dates of employment and reason for leaving:

Are you related to any current employee, if yes please provide their name and relationship to you: _____

Education:

High School: _____

GED: _____

College: _____

Other: _____

Skills: Please list technical skills, clerical skills, trade skills, certifications etc., relevant to this position. Include copies of certifications.

Work Experience: Please detail your entire work history. Begin with your current or most recent employer. If you held multiple positions with the same organization, detail each position separately. Omitting prior employment is considered falsifying information. Please explain any gaps in employment. Include Full-Time military or volunteer commitments. **Please refrain** from using the notation "See Resume" when completing this information. **Please Note:** Taylor County Emergency Squad reserves the right to contact all current and former employers for reference information.



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Organization Name and Address:

Phone Number: _____

Dates Employed (Most recent position) From: _____ to: _____

Full or Part Time: _____ Starting Salary: _____ Final Salary: _____

Title: _____ Supervisor's Name, Title, and Phone _____

Primary Duties: _____

Reason for leaving: _____

Organization Name and Address: _

Phone Number: _____

Dates Employed (Most recent position) From: _____ to: _____

Full or Part Time: _____ Starting Salary: _____ Final Salary: _____

Title: _____ Supervisor's Name, Title, and Phone _____

Primary Duties: _____

Reason for leaving: _____



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Title: _____ Supervisor's Name, Title, and Phone _____

Primary Duties: _____

Reason for leaving: _____

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Phone Number: _____

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References: Please list a minimum of three references, you can list as many references as you would like. Please provide valid phone numbers and titles for all listed references.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Please read carefully and sign that you understand and accept this information.

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete this form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination of employment if discovered later. I authorize Taylor County Emergency Squad to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to mail full responses to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical examination, criminal and background investigation, and/or screening for illegal substances upon application. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. Taylor County Emergency Squad staff are at-will employees, and either party can end the employment relationship at any time for any lawful reason. If hired, I will need to provide proof of eligibility to work in the United States. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. The initial 180 days of regular employment are a provisional period. During this time, employees are not eligible to apply for transfer or promotion and may be subject to termination without the right of appeal.

Applicant Signature:

Date: _____



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Authorization for Background Checks

After Carefully reading this background check disclosure and authorization form, I authorize Taylor County Emergency Squad (TCES) to order my background report, including investigative consumer reports. I understand that TCES may rely on this authorization to order additional background reports, including investigative consumer reports during my employment without asking me for my authorization again as allowed by law.

I also authorize the following agencies and entities to disclose to TCES and its agents all information about or concerning me, including, but not limited to; my past or present employers, learning institutions, including colleges and universities; law enforcement and all other federal, state and local agencies; federal, state and local courts; military; credit bureaus; testing facilities; motor vehicle records agencies; all other private and public sector repositories of information; and any other person, organization, or agency with information about or concerning me. The information authorized for disclosure to TCES, and its representatives encompasses, but is not limited to details concerning my employment history, earnings records, educational background, credit history, motor vehicle records, criminal records, military service, professional credentials, and licenses, as well as substance abuse and testing.

I agree that the company may rely on this authorization to order background reports, including investigative consumer reports, from companies other than TCES without asking me for my authorization again as allowed by law. I also agree that a copy of this form is valid like the signed original. I hereby certify that all the personal information provided on this form is accurate and truthful. I understand that any form of dishonesty may result in my disqualification from employment consideration with TCES or, if already employed, may lead to the termination of my employment.

Name; Last: _____ First: _____ Middle: _____

Maiden/Other: _____

For Identification purposes only: Date of Birth _____ (Month/Day/Year)

Present Address: _____

Prior Address: _____

From _____ (Month/Day/Year) To: _____ (Month/Day/Year)

Signature: _____ Date: _____