



OAK BLUFFS FIRE-EMS DEPARTMENT

6 Firehouse Lane P.O. Box 2131 Oak Bluffs, MA 02557
Telephone: 508-693-5380 | FAX: 508-693-6726



Nelson Wirtz
Fire-EMS Chief

Stephen Foster
Deputy Fire Chief

Emergency Medical Services Application

Please print legibly in blue or black ink and complete all sections.

Date: _____

Personal Information:

Legal Name: _____

Preferred Name: _____

Pronouns: *(Circle all that apply)* he/his she/her they/them Other: _____

Street Address: _____

Mailing Address: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

Primary Language: _____

Secondary Language(s): _____

Work Availability: *(Circle one)* Full Time Seasonal Per Diem

Emergency Contact Information:

Primary Emergency Contact Name: _____

Relationship: _____

Cell Phone: _____ Home Phone: _____

Secondary Emergency Contact Name: _____

Relationship: _____

Cell Phone: _____ Home Phone: _____

Employment Experience: *Start with your current or last job first and include any military service and volunteer activities. A resume may be attached with your application.*

Employer: _____ Job Title: _____

Address: _____

Occupation: _____ Working Hours: _____

Employment Dates: From: _____ To: _____

Work Performed: _____

Reason for Leaving: _____

Supervisor's Name: _____ Job Title: _____

Cell Phone: _____ Work Phone: _____

Email Address: _____



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Employer: _____ Job Title: _____
Address: _____
Occupation: _____ Working Hours: _____
Employment Dates: From: _____ To _____
Work Performed: _____
Reason for Leaving: _____
Supervisor's Name: _____ Job Title: _____
Cell Phone: _____ Work Phone: _____
Email Address: _____

Education/Background Information: *A CORI check will be done.*

Education Level Completed: _____
Educational Institution: _____
Program of Study: _____
EMS Certification Level: _____ State: _____
Special Qualifications and/or Training (Diving, Rescue, etc.): _____

Are you able to perform all the requirements and duties outlined in the job description? Yes No
Do you have any problems lifting? _____

References: *Please provide three professional references (supervisors, teachers, mentors, etc.)*

Name: _____ Relationship: _____
Cell Phone: _____ Home Phone: _____
Email Address: _____

Name: _____ Relationship: _____
Cell Phone: _____ Home Phone: _____
Email Address: _____

Name: _____ Relationship: _____
Cell Phone: _____ Home Phone: _____
Email Address: _____

Attach the Following:

1. Massachusetts Driver's License (Class A, B, C or D)
2. EMS Certification (EMT-A, B, or Paramedic)
3. Certifications
4. Current Resume (*Optional*)



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Applicant's Statement:

I certify that the above information is correct and complete to the best of my knowledge.

I authorize the Town of Oak Bluffs to investigate all statements made as part of this application and to secure any necessary information from all prior employers, references, academic institutions, and law enforcement agencies.

I agree to take a physical examination, if required, given by an appointed town physician, which may include a drug test or a psychological exam, and recognize that any offer of employment may be contingent upon results of such examination.

I understand that I must be available to work outside of normal business hours, as the needs of the department require.

I understand that any employment offer by the Town is conditional upon my ability to establish employment eligibility under the Immigration Reform and Control Act of 1986 within three days of the date of hire.

I understand that any false answers or statements or misrepresentations by omission made by me as part of my application will be sufficient for rejection of my application or for my immediate dismissal, should one be discovered after I am employed.

Employment is not guaranteed for a definite period of time and that some positions regarded as part-time and/or temporary are paid for actual hours worked and are not entitled to benefits offered to full-time positions (except FICA and Workers' Compensation).

I also acknowledge that if hired I will abide by the Policies and Procedures of the Town of Oak Bluffs and the Fire-EMS Department and the job description.

Applicant's Signature: _____
Applicant's Printed Name: _____
Date: _____

The Civil Rights Act of 1964 prohibits discrimination in employment practice because of race, color, religion, sex or national origin. PL90-202 prohibits discrimination because of age.