

YARDLEY MAKEFIELD EMERGENCY UNIT

Employment Application / Volunteer Application

APPLICANT INFORMATION

Last Name		First	M.I.	Date		
Street Address			Apartment/Unit #			
City		State	ZIP			
Phone		E-mail Address				
Date Available		Social Security No.	Desired Salary			
Position Applied for Circle: Employment or Volunteer (must be at least 16 years old)						
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		

EDUCATION

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list three professional references.

Full Name		Relationship
Company		Phone ()
Address		
Full Name		Relationship
Company		Phone ()
Address		
Full Name		Relationship
Company		Phone ()
Address		

PREVIOUS EMPLOYMENT

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

CRIMINAL BACKGROUND / DRIVER HISTORY

Have you ever been arrested and or charged with any criminal offense? (Not including summary traffic offenses)? YES NO

Have you been convicted of any criminal offense, including DUI? YES NO

Have you ever been convicted of a summary traffic offense in the past 10 years? YES NO

Drivers License Number and State of Issue _____

Has your license ever been suspended or revoked? YES NO

IF YES, PLEASE EXPLAIN (IF YOU NEED MORE SPACE, ATTACH EXPLANATION TO THE BACK OF THE APPLICATION)

IF YES, PLEASE EXPLAIN (IF YOU NEED MORE SPACE, ATTACH EXPLANATION TO THE BACK OF THE APPLICATION)

MILITARY SERVICE

Branch

From

To

Rank at Discharge

Type of Discharge

If other than honorable, explain

CERTIFICATIONS (ATTACH COPIES OF CERTIFICATIONS)

EMT or Paramedic Certification Number and State of Issue	Expiration Date
CPR Certification AHA Red Cross Other _____	Expiration Date
ACLS Certification AHA Other _____	Expiration Date
PALS or PEPP Certification	Expiration Date
List Any Other Certifications	Expiration Date(s)

Criminal History Report and Child Abuse History Reports: (*Volunteers under age 18 excluded*)

You must attach a copy of your criminal history report to the employment/volunteer application along with a copy of the Pennsylvania Child Abuse History Clearance. Any application received without a criminal history and /or the child abuse history clearance report will not be accepted. Using a credit card, you may obtain a criminal history report at this website:

<https://epatch.state.pa.us/Home.jsp>

The Pennsylvania Child Abuse History Clearance is attached at the back of the application and must be removed and submitted to the Department of Public Welfare. You will need to obtain a money order for the child abuse history. (instructions are at the top of the form).

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I authorize Yardley Makefield Emergency Unit, Lower Makefield Township Police Department and its agents to make inquires of my personal employment, criminal background, driving history, educational, financial and other related matters as may be necessary for employment purposes. I hereby release employers, schools, individuals or other agencies from all liability when responding to inquiries in connection with my application

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate termination of employment.

Signature**Date****PARENTAL OR LEGAL GUARDIAN CONSENT FOR VOLUNTEER APPLICANTS UNDER AGE 18**

I authorize my son/daughter to join the Yardley-Makefield Emergency Unit as a Volunteer Member. I also authorize my son/daughter to participate in emergency and non emergency ambulance operations with the Yardley-Makefield Emergency Unit. (Volunteers under age 18 must be certified in CPR and First Aid to ride on the ambulance. Volunteers under age 18 must obtain valid working papers).

Signature**Date**

PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE

COMPLETE SECTION I ONLY. PRINT CLEARLY IN INK. ENCLOSE \$10.00 MONEY ORDER ONLY. PAYABLE TO DEPARTMENT OF PUBLIC WELFARE. DO NOT SEND CASH OR PERSONAL CHECK.

SEND TO CHILDLINE AND ABUSE REGISTRY, DEPARTMENT OF PUBLIC WELFARE, P.O. BOX 8170 HARRISBURG, PA 17105-8170

APPLICATIONS THAT ARE INCOMPLETE ILLEGIBLE OR RECEIVED WITHOUT FEE WILL BE RETURNED UNPROCESSED. IF YOU HAVE QUESTIONS CALL 717-783-6211

CHILDLINE USE ONLY

DATE RECEIVED BY CHILDLINE

SECTION I APPLICANT IDENTIFICATION

IN THIS SPACE PRINT APPLICANTS FULL NAME AND ADDRESS (DO NOT USE INITIALS)

NAME

STREET

CITY, STATE
ZIP CODE

SOCIAL SECURITY NUMBER		
AGE	DATE OF BIRTH	DAYTIME PHONE NO.
SEX <input type="checkbox"/> M <input type="checkbox"/> F		COUNTY YOU LIVE IN

PREVIOUS NAMES USED SINCE 1975 (Include Maiden Name, Nicknames, Aliases)

(FIRST, MIDDLE, LAST)

(FIRST, MIDDLE, LAST)

PURPOSE OF CLEARANCE (Check ONE block ONLY)

- | | | |
|---|---|---|
| <input type="checkbox"/> CHILD CARE
<input type="checkbox"/> FOSTER CARE
<input type="checkbox"/> ADOPTION
<input type="checkbox"/> SCHOOL | <input type="checkbox"/> VOLUNTEERS-A copy of your PROCESSED "Request for Criminal Record" (Form SP4-164) must be attached. Out-of-state residents must also attach a copy of their PROCESSED FBI clearance (Form FID-258). | <input type="checkbox"/> CWEP (Community Work Experience Program Participant) |
|---|---|---|

SIGNATURE OF CAO REP

CAO PHONE NO

PREVIOUS ADDRESSES SINCE 1975 (Attach additional pages if necessary)

1. _____
2. _____
3. _____
4. _____

HOUSEHOLD MEMBERS (List everyone who lived with you at anytime since 1975 to the present).

NAME (First, Middle, Last) Do not use initials.	RELATIONSHIP	PRESENT AGE	SEX
1.			
2.			
3.			
4.			
5.			
6.			

I certify that the above information is accurate and complete to the best of my knowledge and belief and submitted as true and correct under penalty of law (Section 4904 of the Pennsylvania Crimes Code).

Applicants are required to show the Administrator the original document. Administrators are required to keep a copy of this child abuse history record on file. Any person altering the contents of this document may be subject to civil, criminal or administrative action.

APPLICANT'S SIGNATURE

DATE

DO NOT WRITE IN THIS SECTION - CHILDLINE USE ONLY

SECTION II RESULTS OF HISTORY CHECK

- | | |
|---|--|
| <input type="checkbox"/> APPLICANT IS NOT LISTED IN A REPORT OF CHILD ABUSE OR A REPORT FOR SCHOOL EMPLOYEE. | <input type="checkbox"/> APPLICANT IS LISTED IN A REPORT OF CHILD ABUSE OR A REPORT FOR SCHOOL EMPLOYEE (SEE BELOW). |
|---|--|

STATUS OF REPORT	DATE OF INCIDENT	STATUS OF REPORT	DATE OF INCIDENT
1.		3.	
2.		4.	

VERIFIER

DATE

VERIFIER'S SUPERVISOR

DATE

SECTION III

VOLUNTARY CERTIFICATION FOR CHILD CARE SERVICES

_____ has requested a certification which includes a clearance of his/her name against the child abuse, school employee, and criminal history reports.

The results of the child abuse and school employee report clearances are listed in Section II on the reverse side. The results of the criminal history reports are listed below. Out-of-state residents must have criminal history clearance from both the Pennsylvania State Police and the FBI. The voluntary certification may be obtained every two years.

It is the responsibility of parents and guardians to review this information to determine the suitability of the applicant as a substitute caregiver.

PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE

- Applicant is named as the perpetrator of a "Founded" child abuse or school employee report which occurred in the last five years.
- Applicant is named as the perpetrator of a "Founded" child abuse or school employee report which occurred over five years ago.
- Applicant is named as the perpetrator of an "Indicated" child abuse or school employee report.
- Applicant is not named as the perpetrator of any child abuse or school employee report contained in the Statewide Central Register.

PENNSYLVANIA STATE POLICE CLEARANCE

- Record exists and contains convictions which prohibit hire in a child care position. Report attached.
- Record exists, but convictions do not prohibit hire in a child care position. Report attached.
- Record exists, but no convictions are shown. This does not prohibit hire in a child care position. Report attached.
- No record exists. Report attached.

FBI CLEARANCE

- Record exists and contains convictions which prohibit hire in a child care position. Report attached.
- Record exists, but convictions do not prohibit hire in a child care position. Report attached.
- Record exists, but no convictions are shown. This may not prohibit hire in a child care position. Report attached.
- No record exists. Report attached.
- No FBI clearance required.

VERIFIER_____
DATE_____
VERIFIER'S SUPERVISOR_____
DATE