



APPLICATION FOR EMPLOYMENT



137 Washington Street, Somerville, MA 02143
Telephone (617) 625-0126, Fax (617) 616-1371

WEBSITE: www.cataldoambulance.com

Complete application on-line, place cursor under last name and type, press tab key to move from field to field.
Click cursor on a check box to select. When complete, immediately print application and mail or fax to Cataldo Ambulance Service.

A completed Cataldo application is required for each position applying for; resumes are optional unless requested.

Resumes will not be accepted as a substitute for a completed Cataldo employment application. Contact Human Resources at (617) 625-0126 for questions or required accommodations for the application or interview process.

Personal Information

PLEASE TYPE OR PRINT CLEARLY IN INK.

NAME:	Last	First	Middle
PRESENT ADDRESS:	Street / Apt #	City	State Zip Code
PHONE NUMBERS:	Home	Work	Other
E-mail address:	If employed, can you submit verification of your legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you under 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Employment Desired

Job No.	Position Title	Location	How did you learn about this position?
Employment desired: <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time <input type="checkbox"/> PerDiem <input type="checkbox"/> Temporary		Available to work: <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Weekends	Date available for work:
May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Currently employed by Cataldo? <input type="checkbox"/> Yes <input type="checkbox"/> No	Previously employed by Cataldo? <input type="checkbox"/> Yes <input type="checkbox"/> No
Can you safely perform all the essential functions of the position for which you are applying with or without reasonable accommodations? <input type="checkbox"/> Yes <input type="checkbox"/> No Please describe accommodations needed, if any:			
Do any of your relatives work for Cataldo? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, please give their name, location, and department:	

Educational Background

School Type	Name and Location of Institution	Circle Last Year Completed	Major Course of Study	Dates	Degree
High School		9 10 11 12			
College		1 2 3 4			
Graduate School		1 2 3 4			
Technical or Trade School		1 2 3 4			
Related Certificates or Licenses:					
Seminars or Other Training:					

CATALDO IS AN EQUAL OPPORTUNITY EMPLOYER

Employment History*Begin with most recent employer; attach additional sheets if necessary*

Employer Name	Type of Business	Business Phone	
Address <i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
Position Held	Hours per Week	Ending Salary	Employment Dates From: To:
Name and Title of Supervisor		Reason for Leaving	
Duties:			

Employer Name	Type of Business	Business Phone	
Address <i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
Position Held	Hours per Week	Ending Salary	Employment Dates From: To:
Name and Title of Supervisor		Reason for Leaving	
Duties:			

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Name and Title of Supervisor		Reason for Leaving	
Duties:			

Explain any periods of unemployment:

Other than minor traffic violations, have you ever been convicted of a crime (this includes drunk, negligent or reckless driving)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Explanation for YES answer
Have you ever been convicted of any crime against persons within the last ten years? If so, please specify the crime(s), date of conviction, and place of conviction.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been discharged or requested or forced to resign from any position because of misconduct or unsatisfactory service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Special Job-Related Skills and Qualifications

List any office machines, equipment, or computer programs related to the position you are applying for that you are qualified to operate:

Rate your keyboarding (typing) skills: None Beginner Intermediate Highly proficient

Relate any additional information that more fully conveys your qualifications:

Other than English, list other languages you speak fluently:

References (do not include relatives)

Name and Occupation	Address	Telephone Numbers
		Home: Work:
		Home: Work:
		Home: Work:

Please indicate any other name used during employment or while in school:

Applicant's Certification and Agreement

Please read before signing.

I hereby certify that all information in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by Cataldo. I authorize the references listed above to provide Cataldo any and all information concerning my previous employment and any other pertinent information that they may have. Further, I release all parties and persons from any and all liabilities for any damages that may result from furnishing such information to Cataldo as well as from the use or disclosure of such information by Cataldo or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, my dismissal from employment.

I also understand that all offers of employment are conditioned on the provision of satisfactory proof of applicant's identity and legal authority to work in the U.S. Offers of employment are also conditioned on Cataldo's receipt of satisfactory responses to reference requests and a criminal background check, when required.

Applicant's Signature: _____ **Date:** _____

Cataldo Ambulance Service is an equal opportunity employer and does not discriminate on the basis of race, color, creed, gender, age, national origin, marital status, or the presence of any sensory, physical, or mental disability, or the use of any trained guide or service dog by a disabled person.

Cataldo Ambulance Service

EQUAL EMPLOYMENT OPPORTUNITY DATA
Voluntary Optional Information

To be completed by Applicant:

Completion of this form is entirely voluntary, and all information will remain confidential and will not affect your application for employment. We are required by law to collect this information for equal opportunity employment purposes, and it will not become part of your personnel record if you are hired by Cataldo Ambulance Service, Inc.

NAME *(optional)* _____

SEX Male Female

AGE Under age 40 Age 40 and over

RACE/ETHNICITY American Indian / Alaskan Native
 Asian
 Pacific Islander / Native Hawaiian
 Black / African American
 Hispanic / Latino
 White
 Other

OTHER Vietnam Era Veteran
 Disabled Veteran
 Individual with a Disability

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