

Harrison County EMS

Job Application

Application for At-Will Employment

AN EQUAL OPPORTUNITY EMPLOYER-M/F/H

APPLICATIONS ARE EFFECTIVE FOR 60 DAYS, AFTER WHICH YOU MUST REAPPLY

Last Name	First Name	Middle	Phone:			
Street Address	City	State	Zip Code			
Are you: 18or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	Position applying for:					
Work Start Date:	Month	Day	Year	Interested in: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time		
Which shifts are you applying for: <input type="checkbox"/> Day <input type="checkbox"/> Night <input type="checkbox"/> Weekends <input type="checkbox"/> Open Availability or specify below						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
Overtime: <input type="checkbox"/> Yes <input type="checkbox"/> No		What Interested you in HCES?				
Compliance: Are you legally qualified to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Note: Use additional sheets of paper if there is more than one conviction						
Prior History: Prior convictions are not an automatic bar to employment. They will be evaluated in light of their number, seriousness, dates, and relationship to anticipated job duties. Note: Use additional sheets of paper if there is more than one conviction.						
Have you ever been convicted of any violation of law, including moving traffic violations? <input type="checkbox"/> Yes <input type="checkbox"/> No						
If yes, then please provide the following: Describe the offense:						
Statue / Ordinance (if known)		Date of charge:		Date of conviction:		
County		City		State of Conviction		
Are you currently on probation or parole for any such sentence? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Are you currently serving any such sentence? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Do you speak, write or understand any foreign languages? [] Y or [] N. If yes, describe which languages(s) and how fluent of a speaker you consider yourself to be.						
Education: Highest School Grade Completed: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12						
High School Diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No		Years of College <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4				
Name and Location of Educational Institution		Degree Received		Major		
High School						
College						
Vocational						

References: Full Name	Address	Phone Number	Relationship
Licenses Held: (Certifications):			
Type:	License (Cert) Number	Issued By:	
Have you ever applied to / worked for HCES before? [] Y or [] N If yes, please explain (include date):			
Work Experience: Start with the most recent work experience. Describe all traditional, military and voluntary work experience. Describe your knowledge, skills and abilities that demonstrate your qualifications for the position for which you are applying.			
Company No.1 (Present or most recent)		Address/Phone Number	
Employed (Month & Year)	Rate of Pay: Start	End	Average Hours Worked Supervisor's Name/Position
Position Held	May We Contact This Employer <input type="checkbox"/> Yes <input type="checkbox"/> No		Reason for Leaving
Describe Your Duties:			
Company No.2 (Present or most recent)		Address/Phone Number	
Employed (Month & Year)	Rate of Pay: Start	End	Average Hours Worked Supervisor's Name/Position
Position Held	May We Contact This Employer <input type="checkbox"/> Yes <input type="checkbox"/> No		Reason for Leaving
Describe Your Duties:			
Company No.3 (Present or most recent)		Address/Phone Number	
Employed (Month & Year)	Rate of Pay: Start	End	Average Hours Worked Supervisor's Name/Position
Position Held	May We Contact This Employer <input type="checkbox"/> Yes <input type="checkbox"/> No		Reason for Leaving
Describe Your Duties:			

Job Application Certification:

I hereby certify that all facts on this job application and any attachments are true and complete. I also agree and understand that any falsification of this information may result in my immediate dismissal. I understand that all information on this job application is subject to verification and I consent to criminal history and background checks. I also agree that you may contact references and educational institutions listed on this application except for the particular employer(s) noted _____ . Furthermore I understand that if I am hired, my employment can be terminated with or without cause at any time, at the discretion of either the company or myself.

Dated: _____	Job Applicant Signature: _____
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Discrimination in employment because of race, creed, color, national origin, ancestry, age, sex, physical or mental disabilities, sexual orientation, marital status or liability for service in the armed forces of the U.S. is prohibited by federal legislation and/or laws against discrimination in some states. HCES will offer reasonable accommodations to qualified disabled persons needing assistance with the application or interview process.

702 Drug, Alcohol Use, and Testing

Effective Date: 10/31/2009

Revision Date: 9/01/2018

HCES is committed to providing a safe, productive and healthy work environment. That is the purpose of this policy. Since substance abuse poses a serious threat to the clients we serve and the health and safety of all employees, HCES will not tolerate substance abuse in the workplace and maintains a zero tolerance policy in this regard. Substance abuse occurs when an individual misuses alcohol, uses illegal drugs or misuses prescription and over-the-counter drugs and inhalants. This Substance Abuse policy is in effect at all of our facilities, on all HCES property, in any HCES-owned or leased vehicles, while on duty or immediately available for duty, and at all times with regard to illegal drugs.

It is a violation of HCES policy for any employee to:

- Use, possess, sell, trade, offer for sale, buy or otherwise engage in the distribution of any illegal drug or inhalant;
- Consume alcoholic beverages on HCES property;
- Report to work under the influence of alcohol or any illegal drug or inhalant;
- Test positive for alcohol or any illegal drug or inhalant;
- Refuse to be tested, tamper with or destroy a test sample, submit a false sample, or otherwise interfere with the integrity of any testing procedure; or,
- Misuse prescription or over-the-counter drugs in any manner that may result in job impairment or a positive drug test.

Employees violating this policy by either having a confirmed positive test result or by refusing to test or tampering with the test are subject to discharge. They may also forfeit their right to unemployment compensation. Further, employees who are impaired by drugs or alcohol or who refuse to test at the time they are injured may forfeit their right to worker's compensation benefits. In order to enforce HCES's zero tolerance policy, progressive discipline will not normally be applied to cases involving substance abuse. Violations of this policy will ordinarily result in termination of employment.

Drug/Inhalant/Alcohol Testing

Employees will be tested for drugs, inhalants and alcohol in accordance with applicable law. HCES may conduct testing by requiring an employee to provide urine, hair, blood or saliva samples. Samples will be labeled and the chain of custody of samples will be maintained. Employees will be given an opportunity to provide information which they believe to be relevant to the test (for example—medications taken pursuant to a prescription which might influence the result of the test). An employee will not be considered to have failed a test unless the sample is tested a second time, and the second result is confirmed by a medical review officer who is a qualified medical professional at a SAMSHA certified lab, a CLIA approved lab, or a College of American Pathologists approved lab. Drug screens will use a chromatographic testing technique. HCES will pay all costs of testing except the cost of splitting samples (see opportunity to contest or explain test results, below). Employees may be tested for any of the following reasons:

1. **Pre-Employment** - following a job offer as part of the employee's pre-employment screening process.
2. **Maintenance of safety**—All HCES employees have a role to play in maintaining safety, either directly or indirectly. All employees are therefore subject to random testing for the purpose of maintaining safety.

702 Drug, Alcohol Use, and Testing (continued)

Effective Date: 10/31/2009

Revision Date: 11/30/2010, 12/29/2013,7/31/2017

3. Accident investigation—Employees involved in work-related accidents will be tested for drugs/alcohol. Post-accident testing will be by blood sample.
4. Misconduct investigation—All employees are subject to testing conducted as part of investigations into theft or other misconduct.
5. Impairment investigation—All employees are subject to testing to confirm possible impairment.
6. Deterrence—In order to deter drug/alcohol impairment, all employees are subject to random testing for drugs and alcohol.
7. Maintenance of quality of services: All employees are subject to random testing for the purpose of enabling HCES to maintain the quality of its services.
8. Maintenance of productivity: All employees are subject to random testing for the purpose of enabling HCES to maintain productivity.
9. Maintenance of security of property or information: All employees are subject to random testing for the purpose of maintaining security of property or information.
10. Fitness for duty - testing may be required as part of a fitness for duty medical examination. For example, testing may be conducted where required by law, regulation or established policy.

Self Referral

Employees may avoid termination for violation of this policy by asking HCES for an unpaid leave of absence in order to obtain rehabilitation treatment for a substance abuse problem. HCES will require the employee to provide certification that he/she has completed the HCES-approved program prior to returning to work. The cost of the program will be borne by the employee and/or the employee's insurance provider having applicable coverage (if any). HCES does not promise that the coverage available to employees through its group health plan will cover such programs. Once an employee has violated the policy, this option is no longer available. Substance abuse is a treatable condition, and HCES encourages any employee who thinks he or she may have a problem to obtain help before it becomes a disciplinary issue.

Opportunity to Contest or Explain Test Results

Test results are evaluated by a Medical Review Officer. Employees may request that a split sample be subjected to independent testing. If an employee disputes the accuracy of a positive test result, the employee may challenge the result with the Medical Review Officer. The Medical Review Officer will consider any information offered by the employee in this regard. If the Medical Review Officer does not accept the employee's explanation for the challenged result, the test shall be reported back to HCES as positive.

702 Drug, Alcohol Use, and Testing (continued)

Effective Date: 10/31/2009

Revision Date: 11/30/2010, 12/29/2013,7/31/2017

Confidentiality

Any information obtained by HCES pursuant to its drug testing program shall be treated as confidential medical information. All records will be maintained in a secure location in a controlled access area. HCES will only release any drug/alcohol testing records under the following circumstances:

1. With the employee's written authorization, or upon request of the employee's power of attorney should the employee be incompetent or incapacitated;
2. To the decision maker, counsel and court employees in a lawsuit, grievance or other proceeding initiated by, or on behalf of, the individual and arising from the results of an alcohol and/or drug test or from HCES's determination that the employee engaged in prohibited conduct (including, but not limited to worker's compensation, unemployment compensation or other proceedings relating to a benefit sought by the employee); or,
3. Pursuant to a court order, search warrant or other legally constituted request for such information.

Information relating to an employee's drug and alcohol testing, administration of this policy and imposition of disciplinary action will be provided only to a limited number of persons, including, but not limited to, the Executive Director, Human Resources Manager, and the Assistant Chief of Operations. Such information may be shared only by those persons having a legitimate interest in these issues as they relate to the management and direction of the work force.