



**St. Joseph's Ambulance Services**  
 PO Box 33 – Parkersburg WV 26102-0033

304-424-4473  
[www.sjaswv.com](http://www.sjaswv.com)



## Employment Application

### APPLICANT INFORMATION

Last Name	First	Middle	Application Date:
Address			Apartment/Unit #
City	State		ZIP
Primary Phone		Secondary Phone	

Email Address:

Position\* applying for:     Paramedic    Advanced EMT    EMT    EMVO    WC Van Driver    Administrative

Full Time     Part Time     Temporary

**\*Job Descriptions for the positions SJAS is currently hiring are available on our website.**

Are you a citizen of the United States?    YES     NO     If no, are you authorized to work in the U.S.?    YES     NO

Are you 18 years of age or older?    YES     NO

Have you ever been involved with or convicted of Medicare or Medicaid fraud?    YES     NO     If yes, explain:

Are you a previous SJAS employee?    YES     NO     If yes, date of employment, position:

Are you willing to work overtime hours?    YES     NO     If no, explain:

Have you ever submitted an application to SJAS in the past?    YES     NO     If yes, date of application:

Are you willing to work any shift?    YES     NO     If no, explain:

Are you willing to work on a call-in basis?    YES     NO     If no, explain:

Are you able to meet the attendance requirements of the position?    YES     NO     If no, explain:

Date you are available to start work:

### EDUCATION

Do you have a High School Diploma, GED or equivalent?    YES     NO

Do you have a College Degree or course work?    YES     NO

If YES, please list degree or course with Field of Study:

**APPLICABLE LICENSURE & CERTIFICATION**

**EMS Certification** - State of West Virginia (required) Current Certification Expiration Date: \_\_\_\_\_ Cert # **WV**\_\_\_\_\_

Other State: Current Certification Expiration Date: \_\_\_\_\_ Cert # \_\_\_\_\_

**National Registry Certification** Current Certification Expiration Date: \_\_\_\_\_ Cert # \_\_\_\_\_

**Driver's License** – State of West Virginia License # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Other State: License # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**If applying for EMVO or WC Driver, please answer the following:**

Have you been convicted of a moving violation in the past 5 years? YES  NO  If yes, explain:

Check all applicable certifications currently held:

CPR  FIRST AID  ACLS  AMLS  ITLS  PEPP  PALS  EVOC  INSTRUCTOR (List below in summary):

Summarize your EMS experience and any other significant EMS training:

**REFERENCES**

*Please provide 2 Professional and 1 Personal Reference (other than relatives)*

<b>Full Name</b>	Relationship
Company	Phone ( )
Address	
<b>Full Name</b>	Relationship
Company	Phone ( )
Address	
<b>Full Name</b>	Relationship
Company	Phone ( )
Address	

**PREVIOUS EMPLOYMENT**

<b>Company</b>		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 <input type="checkbox"/> NO <input type="checkbox"/>			

<b>Company</b>		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 <input type="checkbox"/> NO <input type="checkbox"/>			

<b>Company</b>		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 <input type="checkbox"/> NO <input type="checkbox"/>			

**MILITARY SERVICE**

Branch		From		To	
If currently in military, describe status:					
Rank at Discharge				Type of Discharge	
If other than honorable, explain					

**SHORT ESSAY**

In the space below, please indicate why you wish to be employed with St. Joseph’s Ambulance Services. Also describe your availability to work shifts for SJAS.



**DISCLAIMER AND SIGNATURE**

In making application for employment: I certify that the information in this application is complete for all practical purposes and it may be verified by St. Joseph’s Ambulance Services. Should a position be offered and later it is found that this information is significantly untrue, incomplete or misrepresented, I understand and agree that St. Joseph’s Ambulance Services or its’ affiliates are relieved of all commitments, financial or otherwise pertinent to employment, and I am subject to immediate discharge without recourse.

I understand and agree that if I am offered employment by St. Joseph’s Ambulance Services, my employment will be for no definite term and that either I or St. Joseph’s Ambulance Services will have the right to terminate the employment relationship at any time, with or without cause, and with or without notice.

In addition, I acknowledge I have received a copy St. Joseph’s Ambulance Services (SJAS) Illegal Drug-Free / Alcohol Free Environment Policy and related Policy Educational Acknowledgement Page. I understand my signed copy of this Acknowledgement Page needs to be submitted to the SJAS office along with my completed SJAS Employment Application.

I have read and understand these conditions of employment.

**Signature**

**Date**

This Employment Application will expire and no longer be considered after thirty (30) days from the date of the applicant’s submission of this application.

**SJAS USE ONLY:**

Date Rec’d \_\_\_\_\_ Date Reviewed \_\_\_\_\_ Meets Qualifications YES  NO  Interview Scheduled \_\_\_\_\_ Rev 04/22



## Illegal Drug-Free/Alcohol-Free Environment Policy Educational Acknowledgement Page

I acknowledge that I have received and been educated on St. Joseph's Ambulance Services Illegal Drug-Free/Alcohol-Free Environment Policy. I understand that I am responsible for reading, acknowledging and abiding by the contents and terms of this policy. I understand that this policy is in compliance and written in accordance with the West Virginia Safer Workplaces Act (2017), and is intended to provide me with the rules, guidance and consequences of the policy's contents. I understand that as an employee and prospective employee/applicant, I must comply and submit for testing as required by the policy; and also abide by the policy which requires my conformance as an employee for the duration of my employment.

I understand and accept that it is incumbent upon me to abide by this policy or be subject to its consequences, which includes, but is not limited to the following:

- Temporary or permanent removal from the employee's job position pending confirmation of testing results and any other investigatory process
- Forfeiture of employee's eligibility for Unemployment Compensation benefits; and if injured at the time of the intoxication or influenced impairment, indemnity benefits under the Workers Compensation Laws
- Corrective action including employee's termination of employment; and prospective employees/applicants will have any employment offers rescinded

I understand and acknowledge that my employment or prospective employment with the company is at-will; and that this policy, nor my acknowledgement of it does not changes my at-will status with the company or prospective employment status with the company, should I presently be a prospective employee/applicant. Employees of the company have the right to resign at any time with or without cause, just as the company may terminate my employment at any time with or without cause or notice, subject to applicable laws; or rescind any offers of employment should I presently be a prospective employee/applicant.

My acknowledgement, understanding and commitment to abide by the Illegal Drug-Free/Alcohol-Free Environment Policy are signified by my signature below:

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**(Signature of Employee or Prospective Employee/Applicant)**

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**(Date)**

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**(Company Representative)**

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**(Date)**



## **Illegal Drug-Free / Alcohol-Free Environment**

**Policy Statement:** The purpose of this Policy is to state the company's commitment to a safe working environment and one free from illegal drugs and alcohol. To ensure the safety of our employees, patients, customer, vendors, associates and the general public, this policy is established in accordance and compliance with the West Virginia Safer Workplaces Act (2017).

**Scope:** This Policy covers all employees and prospective employees of the company

**Purpose:** In accordance and compliance with the West Virginia Safer Workplaces Act (2017) the company prohibits employees from unlawfully manufacturing, distributing, dispensing, possessing or using illegal drugs, controlled substances or intoxicants in any form while engaged in the work and/or the business of the company. In addition, employees may not be under the influence of alcohol while engaged in the work and/or the business of the company. Prescription drugs or over-the-counter medications, taken as prescribed, are an exception to this policy.

In accordance with the West Virginia Safer Workplaces Act (2017) company will test employees and prospective employees for illegal drugs, controlled substances, inhalants or prescription drugs not prescribed for self-use; additionally, the company will test employees for alcohol use while engaged in the work and/or the business of the company.

As such, the company's implementation of a drug-free workplace program in accordance with the West Virginia Safer Workplaces Act (2017), mandates compliance by employees as required to submit to a test for the presence of drugs or alcohol. If a drug or alcohol (at level of .02% or more) is found through testing to be present in the employee's system, the employee will be terminated and forfeit their eligibility for unemployment compensation benefits and if injured at the time of the intoxication or influenced impairment, indemnity benefits under the Workers Compensation Laws.

In addition, in compliance with the West Virginia Safer Workplaces Act (2017), and in accordance with the company's drug free workplace program, all employees and prospective employees are notified by this policy that as a condition of employment, employees are to refrain from reporting to work or working with the presence of drugs or alcohol in their bodies; and that if an injured employee refuses to submit to a test for drugs or alcohol, that employee forfeits eligibility for unemployment compensation benefits, and if injured, for indemnity benefits under the Worker Compensation Laws.

**Administration:** As required by the West Virginia Safer Workplaces Act (2017), the company adheres to the following administration in accordance with the Act:

### **Reasonable Cause or Suspension**

Our company has an obligation of professional service and safety to the individuals involved in our business, to include but not limited to employees, patients, customers, vendors, associates and the general public. Therefore, we are committed to a safe workplace and providing safe and professional services to the public, and in so doing comply in accordance with the West Virginia Safer Workplaces Act (2017). The company acts objectively, in good faith with reasonable cause or suspicion in observance of employees or prospective employees whose work performance or behavior appears to be impaired, or who have an odor of alcohol. Any employee drug or alcohol testing will be conducted during, or immediately before or after, a regular work period.



## **Refusal to Test**

Employees who refuse to submit for and provide a sample for testing will subject to corrective action to include termination of employment. Prospective employees who refuse to comply with requests to provide a sample for pre-employment testing will have any employment offers rescinded. Additionally, employees whose testing results are confirmed as positive, in accordance with this policy and the West Virginia Safer Workplaces Act (2017), will forfeit their eligibility for Unemployment Compensation benefits, and if injured at the time of the intoxication, indemnity benefits under the Workers Compensation Laws.

## **Sensitive Employees**

Employees whose job positions directly or indirectly effect the life, health or physical (or otherwise) well-being of others, including but not limited to patients, coworkers and general public; whereas errors and/or accidents can cause loss of human life, serious bodily injury, or significant property or environmental damage, will be removed from temporarily or permanently from their job position pending confirmation of testing results and any other investigatory process.

Employees involved in vehicle accidents are required to stay at the scene and if requested will submit to drug and alcohol testing. Employees are expected to cooperate in any and all investigatory processes.

## **Procedures**

Any drug or alcohol testing of employees shall occur during, or immediately before or after, a regular work period. Testing time is considered as "worked time" for the purposes of

compensation and benefits for current employees. The company will pay all actual costs for drug and/or alcohol testing (initial and confirmation testing) for employees and prospective employees; and the compensation for the testing time and applicable transportation costs for current employees if their required tests are conducted at a location other than the employee's

normal work site(s). Employees and prospective employees are required to comply with the procedures administered by the testing facilities in accordance with the West Virginia Safer Workplaces Act (2017).

In compliance with the West Virginia Safer Workplaces Act (2017), all sample collection and testing of drugs and alcohol are performed in accordance with the following conditions:

- (1) The collection of samples shall be performed under reasonable and sanitary conditions
- (2) Any observer of the collection of urine samples are by individuals of the same sex as the employee or prospective employee
- (3) Sample collections shall be documented, and these documentation procedures shall include:
  - (A) Labeling of samples so as to reasonably preclude the possibility of misidentification of the person tested in relation to the test result provided and handling of samples in accordance with reasonable chain-of-custody and confidentiality procedures; and
  - (B) An opportunity for the employee, or prospective employee, to voluntarily provide notification of any information which may be considered as relevant to the test, including, but not limited to, identification of currently or recently used prescriptions or nonprescription drugs, or other relevant medical information. This may be accomplished by providing procedures for review by a qualified medical professional to verify a laboratory sample which tests positive in a confirmatory test.
- (4) Sample collection, storage and transportation to the place of testing shall be performed so as to reasonably preclude the possibility of sample contamination, adulteration, or misidentification.



## **Positive Test Confirmations**

Confirmation of any positive test results will commence when drug and alcohol testing results are positive. Confirmatory drug testing shall be conducted at a laboratory: (i) Certified by the U. S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration; (ii) approved by the U. S. Department of Health and Human Services under the Clinical Laboratory Improvements Act; or (iii) approved by the College of American Pathologists. For drug testing, confirmation testing will be by use of a different chemical process than was utilized initial drug screening. The second confirmatory drug test will be chromatographic technique such as gas chromatography/mass spectrometry, or another comparably reliable analytical method.

If confirmation testing takes place and the results for drug or alcohol (at a level of .02% or more) are positive, the employee may be subject to corrective action including termination of employment; and prospective employees will have any employment offers rescinded. If a drug or alcohol is found through testing to be present in the employee's system, the employee will

be terminated and forfeit their eligibility for unemployment compensation benefits and if injured at the time of the intoxication, indemnity benefits under the Workers Compensation Laws.

## **Split Samples**

In the event an individual desires to challenge the results of his or her initial sample test result, that person will have the right to have the split sample tested by another laboratory. The cost associated with the testing of the split sample will be the responsibility of the individual challenging the initial sample test results.

## **Confidentiality**

All communications received by the company relevant to employee's or prospective employee's drug or alcohol test results and received through the company's drug testing program are confidential communications and will not be used or received in evidence, obtained in discovery or disclosed in any public or private proceeding, except for a proceeding related to an action taken by the company under the West Virginia Safer Workplaces Act (2017), for example: Unemployment Compensation, Workers' Compensation, Litigation.

## **Adverse Actions**

The following adverse actions will apply if initial testing results are confirmed as positive in accordance with the procedures required by the West Virginia Safer Workplaces Act (2017):

**Employees:** Suspension w/o pay while positive test result is waiting for positive confirmation results; termination of employment upon positive confirmation of initial positive test results

**Prospective Employees:** Retraction of any previous employment offer, refusal to hire





**Violations:** The company will take appropriate action to remedy violations of this policy. Employees found to be in violation of this policy will be subject to the appropriate corrective action up to and including termination of employment.

**Related Policies or Form: Policy Educational Acknowledgement Page for "Illegal Drug-Free / Alcohol-Free Environment Policy; Code of Professional Conduct; Corrective Action Policy**

**Definitions and References:**

- "Employee" means any person in the service of an employer, as defined in this section.
- "Good faith" means reasonable reliance on facts, or that which is held to be factual without the intent to deceive or be deceived and without reckless, malicious or negligent disregard for the truth.
- "Prospective employee" means any person who has made application to an employer, whether written or oral, to become an employee.
- "Sample" means such sample of the human body capable of revealing the presence of alcohol or other drugs or other metabolites.
- "Split sample" means a part of the sample that is sent to a first laboratory and retained unopened, and which is transported to a second laboratory in the event that the employee requests that it be tested following a verified positive test result of the primary specimen.
- "Alcohol" means ethanol, isopropanol or methanol
- "Drugs" means non-prescription, illegal drugs, controlled substances or intoxicants