

CRIMINAL HISTORY INFORMATION

Have you ever been convicted of any criminal activity? If so, list arresting agency, nature of incident, and final disposition of incident (excluding motor vehicle violations)

Do you have any criminal charges pending? (explain)_____

PRIOR AMBULANCE/EMERGENCY SERVICES EXPERIENCE

HAVE YOU EVER BEEN A MEMBER OF ANY OTHER AMBULANCE/EMERGENCY SERVICE ORGANIZATION? Yes No

Name and Address of ambulance/emergency service organization_____

List any and all ambulance/emergency service credentials_____

SERVICE & CIVIL ORGANIZATION EXPERIENCE

List any service and/or civic organization that you are a member of presently, or have been a member of, along with dates you joined and, if applicable, date of termination_____

I, the undersigned, do hereby affix my signature claiming the information contained herein to be true and correct to the best of my knowledge, and do understand that any misrepresentation of facts contained herein will result in immediate expulsion from the Souderton Community Ambulance Association, and do further state that by my signature, I permit and authorize the members of the Souderton Community Ambulance Association, and whomever they may designate, to have access to and/or have released to those persons any and all information regarding the contents of the application.

Whereas I further state that I accept and any all equipment designated to me as the equipment of Souderton Community Ambulance Association and do fully understand that these items are my responsibility in as much as the maintenance and general care of this equipment is my responsibility. I further understand that this equipment is to be returned in its entirety upon my resignation or termination from the Souderton Community Ambulance Association.

Whereas I further state that I am aware that any consumption of any type of an intoxicating beverage at any function of the Souderton Community Ambulance Association before I am of the legal and mandatory age to consume same beverage will result in the immediate expulsion from the Souderton Community Ambulance Association.

Whereas I do attest by my signature that I am aware as mandated by the by-laws of Souderton Community Ambulance Association that I attend any and all training sessions and meetings as so called for and that I

present myself in a manner of respect and dignity to uphold the integrity of the Souderton Community Ambulance Association at all times.

Signature _____ Date _____