



First Priority Inc.
1831 Airport Blvd.
Cayce, SC 29033
(803)363-6783 Voice
(803)753-0054 Fax

Name and Phone Number

Email Address

Instructions for Completing Application Packet

You must be at least 18 years old to apply for work at First Priority Inc.

First Priority Inc. is a **smoke free** facility.

If you are applying for a job that specifies a closing date, your application must be received at **First Priority Inc.** 1831 Airport Blvd. Cayce SC 29033 or by fax at (803) 888-1378 by 4:30 p.m. on the date indicated.

Your application remains in active review for a 90-day period. Any questions regarding your application, or to reactivate (renew) your application email fto@firstpriorityems.com.

Employees are required to keep current all applicable licenses (Drivers, EMT, Paramedic, CPR, ACLS, etc...) as required for initial employment. **Include copies of all certifications with your application.** Employees will also be required to pass a standardized lifting test and drug screening.

You must provide an official copy of your 10 yr. **DRIVING RECORD** with your application.

You must provide a copy of your **SLED check** available from <https://catch.sled.sc.gov>

STEP 1: Print in black or blue ink or type. Include your name and social security number where indicated.

STEP 2: Complete Pages 2, 3 and 4, listing all work history information. The application and all release forms must be complete. (*Please print clearly*) A resume may not be submitted in place of the application. Should you choose to submit a resume with your application, it will be reviewed and contained within the submitted application only.

STEP 3: Complete the Reference Release forms (Page 5 and 6) located within your application. Completing these forms allows First Priority Inc. to secure academic, work and DMV information.

First Priority Inc. is an Equal Opportunity Employer.



Interview Process

- **Initial interview**- Formal interview with no less than two of our Field Training Officers
- **Secondary Interview**- Formal interview with no less than two members of our executive level management team.
- **Offsite interview**- Informal interview with a member of management. interview settings will vary but will always be outside of the office setting.



Core Values of First Priority

Integrity Doing the right thing when no one is looking

Respect Treat others as you want to be treated

Compassion Take action to ease others' suffering

Service Serve others selflessly

Take Ownership Act like you own the place

Don't Gossip Negatives go up, positives go all around

Lead Fearlessly Never be afraid of tough decisions

Humility Take pride in your team's work without arrogance

1 Team 1 Dream Team work makes dream work

Never Give Up Never, Never, Never Give Up

7. EXPERIENCE - Starting with the most recent describe all paid, military, and applicable voluntary experience.

May we contact your Supervisor? Yes No

Job Title: _____

Employer: _____

Address: _____

Phone #: _____ Type of Business: _____

Immediate Supervisor: _____

Duties: _____

Dates (mo/yr) _____ to (mo/yr) _____ Full Time Part Time _____ Hours/Week

Job Title: _____

Employer: _____

Address: _____

Phone #: _____ Type of Business: _____

Immediate Supervisor: _____

Duties: _____

Dates (mo/yr) _____ to (mo/yr) _____ Full Time Part Time _____ Hours/Week

Use this space for any additional information you think would help us evaluate your application, including training, seminars, workshops, special achievements or specialized skills:

8. **REFERENCES** – List names, addresses and relationships of three persons not related to you who know your qualifications.

Name	Address	Phone	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9. **MICELLANEOUS**

- a. Check which shifts you will accept (all that apply): 48 hour 24 hour
 12 hour Rotating On Call Weekends Nights
- b. What wage are you expecting? _____
- c. Check which employment you would accept (all that apply): Full Time Part Time
- d. Are you eligible for employment in the United States? Yes No
- e. Have you ever been convicted of a felony? Yes No
- f. When will you be available to start work? _____

10. **CERTIFICATION-** Each application requires current date and original signature.

I hereby certify that all entries on all sides and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment in the service of **FIRST PRIORITY INC.** I understand that all information on this application is subject to verification and I consent to references and former employers and educational institutions listed being contacted regarding this application if I so duly noted. I further authorize **FIRST PRIORITY INC.** to rely upon and use as it sees fit any information received from such contacts.

Date: _____ **Applicant Signature:** _____
(If you are not able to sign digitally this can be signed at interview)

Reference Release

This form will be given to employers and/or schools you have attended for authorization to release information on your employment or academic history to **FIRST PRIORITY INC.** Employment at **FIRST PRIORITY INC.** is contingent upon satisfactory references.

By signing below, I grant permission to release information to First Priority Inc, relating to my work and/or academic experience.

Applicant's Name (Please Print)

Social Security Number _____ Date _____

Applicant's Signature _____
(If you are not able to sign digitally this can be signed at interview)

Please complete and return to:

First Priority Inc.
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MVR Release Form

In order to provide necessary information to insurance carriers, I authorized, without reservation, **FIRST PRIORITY INC.** to obtain access to my current and/or past motor vehicle record.

Name: _____ Date of Birth: _____

Driver's License #: _____ Driver's License State: _____

I understand that if the information obtained is not acceptable to the insurance carriers, that **FIRST PRIORITY INC.** retains the right to rescind any offer of employment and/or that if at any time during my employment my driving record becomes unacceptable that my employment may be terminated.

Signature: _____ Date: _____
(If you are not able to sign digitally this can be signed at interview)

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