

**LINCOLN COUNTY  
EMERGENCY MEDICAL SERVICES**

**Required Documentation**

Applicants for employment shall submit copies of the following documents. The Lincoln County Application for Employment must be received no later than **3 days prior** to the scheduled assessment center date. All other listed documents may be submitted with the Lincoln County Application for Employment or may be submitted on the day of the assessment center.

***NOTICE: ALL SUBMITTED DOCUMENTS ARE SUBJECT TO VERIFICATION.***

1. Completed **Lincoln County Application for Employment.**
2. A copy of your North Carolina (or state of residence) EMT-Basic, EMT-Intermediate, or EMT-Paramedic certification or license.
3. If Nationally Registered, a copy of your card.
4. Copy of a valid CPR Card (AHA Healthcare Provider's Card, ARC Professional Rescuer CPR Card, or CPR Instructor's Card). **Copy both sides of the card.**
5. EMT-Paramedics: Copy of a valid AHA Advanced Cardiac Life Support Certification Card. **Copy both sides of the card.**
6. Copy of your Driver's License.
7. **If Drivers License is NOT North Carolina - CERTIFIED** copy of your **driving record.** (Obtained from the MVA or DMV of **ALL** states in which you are licensed.)
8. Completed **Physical Agility Assessment Acknowledgment of Risk and Release Form.**
9. Completed and notarized **Authorization for Release of Personal Information Form.**
10. Completed **Availability Questionnaire.**
11. Complete and signed **Driver Notification System Authorization** (completed the morning of the Assessment Center)

**Documents should be mailed or delivered to:**

**Lincoln County EMS  
Attn: Application Packet  
720 John Howell Memorial Drive  
Lincolnton, North Carolina 28092**

**All candidates who successfully complete the assessment center and are offered a final interview shall present the following document(s) to the Lincoln County EMS Director on the date of the Director interview.**

12. **CERTIFIED** copy of your **criminal records check.** (Obtained from the clerk of courts of **ALL** counties in which you have lived in the past **5** years.)

**For Office Use Only:**

Documents Complete: \_\_\_\_\_

Reviewed by: \_\_\_\_\_