

Franklin Park Fire Department

Silver Spanner Paramedic Application

First Name Middle Initial Last Name

Home Address

City State Zip Code Home Phone Cell Phone

Full-Time Department Local # Local Union President

1) Black

2) Red

3) Gold

Full-Time Department Shift (circle one)

of Years on the Job # of Years as a Paramedic (minimum of 18 months) Loyola EMS System

Submit a copy of each of the following with your application:

- 1) Drivers License
- 2) State Paramedic License
- 3) CPR Card
- 4) Letter of Good Standing from Loyola EMS System (www.loyolaems.com)
- 5) Any other EMS Certificates, including:
 - ACLS
 - ITLS
 - PEPP
 - BTLS
 - PALS
 - PHTLS

Completed application and copies of documentation can be submitted:

MAIL

Local 1526
c/o Luke Palermo
P.O. Box 73
Franklin Park, IL 60131

DROP-OFF

Station 2
c/o Luke Palermo
10001 Addison Street
Franklin Park, IL 60131