Print

PER DIEM EMT APPLICATION - Submission #26461

Date Submitted: 5/28/2026

Township of Howell

4567 Route 9 North
Howell, NJ, 07731
(732) 938-4500

Date:

5/28/2026

First Name*

Allison

Last Name

Beecher

Social Security #:

[redacted]

Phone Number:*

[redacted]

Email:*

[redacted]

Referral Source:

Website

Position applied for:*

Per Diem EMT

Address1*

[redacted]

City

[redacted]

State

New Jersey

Zip

[redacted]

Have you ever applied to the Township of Howell Before?

- ○ Yes
- ◉ No

Have you ever been employed by the Township before?

- ○ Yes
- ◉ No

If you are under 18, can you provide proof of eligibility to work?*

- ◉ Yes
- ○ No

Are you legally eligible to work in the United State of America?

- (●) Yes
- ( ) No

(Pursuant to federal Law, proof of US citizenship or immigration status will be required if you are hired.)

Date Available to work:

7/10/2026

What is your desired salary range or hourly rate of pay?

$30 per hour

Type of employment desired?*

Part Time

If necessary, what is the best time to call you?

Weekdays after 1630, all day Friday-Sunday

Will you work overtime if required?

- (●) Yes
- ( ) No

Are you currently on layoff status and subject to recall?

No

Are you able to perform the essential functions of the job for which you are applying for? *

Yes

Employment is conditional upon the results of the criminal background check and medical examination of Township physician. Those applicants requiring a reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department. We are an equal opportunity employer.

May we contact your previous and current employer?

- (●) Yes
- ( ) No

Do you possess a current New Jersey Driver's License?*

- (●) Yes
- ( ) No

Do you possess a current Commercial Driver's License?*

- ( ) Yes- Class A
- ( ) Yes - Class B
- (●) No

Education

High School/GED*

Marlboro High School - Graduated

Years Completed*

4

College

Brookdale Community College - current

Years Completed

Business or Trade School

Years Completed

Employment History

Employer:*
Quality Medical Transport

Telephone:
[redacted]

Dates Employed:*
2/15/2025 – 5/28/2026

Address1
[redacted]

City
Barnegat

State
New Jersey

Zip
08005

Ending job title:
Emergency Medical Technician

Why did you leave?
n/a

May we contact your previous employer?
- (●) Yes
- ( ) No

If you selected no, why do you not want us to contact this employer?

Summarize the type of work performed and job responsabilities?*
Responding to 911 calls, to provide medical care and life saving interventions during emergency situations. Patient assessments are done and care is provided based on conditions present while charting and ensuring crew and patient safety on scene and during transport.

What did you like most about your position?
It is a small family oriented business with.

What were the things you liked least about the position?
There are limited shifts available to work during summer break as a student. Over an hour commute to and from work.

Employer:*

US Army

Telephone:

Dates Employed*

2/24/2026 — 3/26/2026

Address1

City

Fort Jackson

State

South Carolina

Zip

29207

Ending job title:

Trainee

Why did you leave?

Discharge due to injury

May we contact your previous employer?

- (•) Yes
- ( ) No

If you selected no, why do you not want us to contact this employer?

Summarize the type of work performed and job responsabilities?

Participated in the U.S. Army Basic Training, gaining discipline, teamwork, and the ability to perform under pressure while performing to standards.

What did you like most about your position?

The teamwork, discipline, and personal growth I underwent while there..

What were the things you liked least about the position?

Limited personal time however improved my time management and the distance being far and having limited communication to family.

Employer:

North Island Lifeguarding

Telephone:

[redacted]

Dates Employed:

5/20/2024 — 9/2/2024

Address1

[redacted]

City

Point Pleasant Beach

State

New Jersey

Zip

08742

Ending job title:

Lifeguard

Why did you leave?

seasonal job

May we contact your previous employer?

- (•) Yes
- ( ) No

If you selected no, why do you not want us to contact this employer?

Summarize the type of work performed and job responsabilties?

Worked with a team of lifeguards in the summer months, ensuring surveillance, maintenance, and patron safety during swim hours. Outside of patron hours attending training to ensure best care and response.

What were the things you liked least about the position?

Longer commute (>45 min) during the summer time due to summer beach traffic. Shift became repetitive when no patrons at pool.

What did you like most about your position?

Weekly trainings to maintain skills throughout the season, comradery amongst coworkers and supervisors.

Explain any gaps in your employer, other than those due to personal illness, injury or disability:

Due to age, after lifeguarding I was unable to work as an EMT until turning 18 years old, volunteered for local EMS agencies as a cadet and now adult member.

If not addressed on previous pages, have you ever been fired or asked to resign from a job?

- ○ Yes
- ◉ No

If yes, please explain

References

Name	Title	Telephone	Relationship/Number years known
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	

Relationship/Number years known

[redacted]

Skills & Qualifications

Summarize any special training, license, languages you speak and certification that may assist you in performing the position for which you are applying:

I currently have my NREMT certification, NJEMS certification, AHA - BLS/CPR certification, CEVO 5.

Computer skills: Please list any and all computer programs or software that you are proficient in and the years of experience on each program:

Google +6 years, Microsoft +3 years, Imagetrends - 3 years, Traumasoft - 1 year

Related Information

To what job-related organizations (professional, trade, etc) do you belong?

I am a volunteer on Morganville Emergency Medical Services, responding to 911 calls, driving the ambulance, and doing patient care on scene and during transport.

(Exclude memberships that would reveal race, color, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve, National Guard or any other similarly protected status)

List special accomplishments, publications, awards:

Gold President's Volunteer Award (2023), 2nd degree blackbelt through Kukkiwon, AP Scholar Award (2024 and 2025)

(Exclude memberships that would reveal race, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve, Nation Guard or any other similarly protected status.)

In your current or previous job, have you ever written instructions or directions to be followed by employees or customers?

- ○ Yes
- ◉ No
- ○ Not Applicable

If yes, please explain:

Have you ever worked in a supervisory capacity?

No

If yes, please note how many employees you supervised and job responsibilities pertaining to the supervision of other employees:

Is there any other job-related information you want us to know about you?

There is none.

Nepotism

Howell Township's Nepotism Ordinance requires that you notify the Township Manager if you have any relatives, by blood or by marriage, or of you reside with any persons who presently work for the Township or who are Township officials or appointees. This information is to be provided to the Township Manager either by separate correspondence directed to him/her or by stating the names of such persons immediately below. Failure to notify the Manager with the information required above may lead to your dismissal at any time during your employment.

Relative's Name:

Relative's Name:

Applicant Statement

I certify that all the information submitted by me in order to apply for and secure work on this application is true and complete and correct.

I understand that if any false or misleading information, omissions or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time. If hired, I agree to conform to the Company's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment either express or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the Company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the Company. If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice. I understand that no Company representative, other than its Manager, and then only when in writing and signed by the Manager, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives for seeking, gathering and using truthful and non defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application. I also understand that, if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States as required by federal immigration laws. I also understand that federal law will require me to complete an I9 form in this regard

This Township does not tolerate unlawful discrimination or harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local law. No question on this application is used to limit or exclude an applicant from employment consideration on any basis prohibited by applicable federal, state or local law. This Township likewise does not tolerate harassment based on any protected class. The Township takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i)eliminate me from further consideration for employment (ii)eliminate me from further consideration for employment, or (iii)may result in my immediate discharge from the employer's service whenever it is discovered.

Authorization

I authorize the Township of Howell and its agents to investigate all statements contained in this application and to contact all references listed and all other sources deemed pertinent by the Township and its agents to my previous employment, education, qualifications and experience. I authorize those sources to release all information and records they might have concerning me, personal or otherwise, include without limitation, any criminal history, military and disciplinary background. I release all sources and partied from all liability whatsoever that may issue from securing this information, including without limitation the State of New Jersey and its Departments and Divisions.

In addition, I understand that I will be ineligible for employment, or if hired I will be subject to discharge in the event a criminal history record check discloses that I have been convicted of a criminal offense that, in sole opinion of the Township, has a direct relationship between the offense and the position of employment or poses an unreasonable risk to the safety and welfare of others.

Applicant's Name (Please Print)*

Allison Beecher

AB

Initial for Acknowledge and to confirm the above information is true and accurate.

Signature

A signature will be requested if selected to participate in the interview process.

Date:*

5/28/2026

Attachments*

course-certificate.cfm.pdf

Please attach interest letter, resume or certifications/licenses relevant to the position applied for.

EMT Certification*

card-2.pdf

Please attach current certification.

NOTICE TO ALL APPLICANTS AND EMPLOYEES: Screening test for illegal drug use maybe required before hiring.