

## MORROW COUNTY EMS PERSONNEL FILE

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Int. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Social Security Number \_\_\_\_\_ Driver License Number \_\_\_\_\_  
 Married \_\_\_yes \_\_\_no Year \_\_\_\_\_ Spouses Name \_\_\_\_\_  
 Dependents Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Dependents Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Dependents Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Dependents Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Hire Date \_\_\_\_\_ Departure Date \_\_\_\_\_ Reason \_\_\_\_\_  
 Unit Number \_\_\_\_\_ Station Assignment \_\_\_\_\_ Captain \_\_\_\_\_ Lieutenant \_\_\_\_\_

### Equipment Issued

Item	Serial #	Date Iss.	Date Ret.

### Uniforms

Type	Size	Quantity	Issue Date
Pants			
Polo Shirt			
Dress Shirt			
Duty Shirt			
Coat			

### Positions Held

Title	From-To	Remarks	By

### Certifications

Level of Cert.	Cert #	From-To	Expiration Date