

Gold Cross
Affirmative Action Survey
(June 06, 2007)

Applicants are considered for all positions, and employees are treated during employment without regard to race, color, creed, national origin, gender, sexual orientation, marital status, religion, status with regard to public assistance, membership or activity in a local commission, disability, age or any other status protected by law, unless such condition is an impediment to satisfactory job performance and no reasonable accommodation can be made.

We comply with government regulations and affirmative action responsibilities. To assist with government record keeping, reporting and other legal requirement, please fill out the Affirmative Action Survey.

Providing this information is voluntary and refusal to provide information will not have a negative effect on your status as an applicant.

Application Date (*Month, DD, YYYY*): _____ Position(s) applied for: _____

Referral Source: Employment Agency Referral Employee Referral Community Agency Referral Walk In
 Job Service Newspaper Advertisement College Relations Rehire

Gender: Male Female

Race/Ethnic Group:

- Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- Two or more races (Not Hispanic or Latino):** All persons who identify with more than one of the five races below.
- American Indian or Alaska Native (Not Hispanic or Latino):** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Asian (Not Hispanic or Latino):** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- Black or African American (Not Hispanic or Latino):** A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino):** A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White (Not Hispanic or Latino):** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Indicate if any of the following are applicable:

- Special Disability Veteran:** means (A) a veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veteran's Affairs for a disability (I) rated at 30 percent more or (ii) rated at 10 to 20 percent in the case of a veteran who has been determined under Section 1506 of Title 38, U.S.C. to have a serious employment handicap or (B) a person who was discharged or released from active duty because of a service connected disability.
- Veteran of the Vietnam-era:** means a person who (A) served on active duty for a period of more than 180 days and was discharged or released there from with other than a dishonorable discharge, if any part of such active duty occurred in (I) the Republic of Vietnam between February 28,1961, and May 7, 1975 or (ii) between August 5, 1964; and May 7, 1975, in all other cases; or (B) was discharged or released from active duty for a service - connected disability if any part of such active duty was performed (I) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (ii) between August 5, 1964 and May 7,1975, in all other cases.
- Handicapped Individual**

EQUAL OPPORTUNITY EMPLOYER

Gold Cross Requirements:

- A National Registry card and an AHA Health Care Provider CPR card are required for all Paramedics and EMTs. *The CPR and ACLS must be typed American Heart Association cards; handwritten copies will not be accepted*
- An AHA ACLS card is required only for Paramedics.
- Gold Cross will assist you in obtaining state certification as it is needed before orientation. *Both MN and WI State certification cards are required for the Duluth site*
- Must be willing to obtain your PALS and BTLS or PHTLS cards before your next National Registry renewal. Please provide a copy of the front and back each card as indicated .

**National Registry Card
Front**

State MN

CPR Front

CPR Back

ACLS Front

ACLS Back

PALS Front

PALS Back

BTLS/PHTLS

State WI

Other State Certification

Other State Certification

