

**BOONE COUNTY FIRE PROTECTION DISTRICT**

2201 I-70 Dr. NW -- Columbia, MO 65202
(573) 447-5000



An Affirmative Action/Equal Opportunity Employer

Position Applying For: Volunteer

Date Submitted: 7/2/2009 2:47:47PM

PERSONAL INFORMATION

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|---------------------------------|--------------------------|--------------------------|----------------------|
| Name (Last) Lindemann | (First) Andrew | (Middle) David | (SSN) 3936 |
|---------------------------------|--------------------------|--------------------------|----------------------|

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|-----------------------------------|---------------------------|----------------------|-----------------------|
| (Address) 1 Locust lane | (City) hannibal | (State) MO | (Zip) 63401 |
|-----------------------------------|---------------------------|----------------------|-----------------------|

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|--|-------------------------------------|--|
| Telephone Number (Primary) 217-779-5081 (Cell) | Telephone Number (Secondary) | (Email) ALindemann.nremt@gmail.com |
|--|-------------------------------------|--|

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|----------------------------|----------------------------|---|--------------------------------|
| (DOB) 08/21/1988 | (DLN) N047239001 | (DLN State & Classifications) Missouri F, | (DLN Exp) 08/21/2012 |
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|----------------------------------|
| (Traffic Violation) No |
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| (Felony Conviction) No |
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| (US Citizen) Yes |
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EMPLOYMENT HISTORY

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| (Current Employer) Pike County EMS | (Position) Paramedic | (Start Date) 09/2008 | (Contact Employer) Yes |
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| (Contact Employer) Yes | |
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|---------------------------------------|--------------------------------------|--------------------------------|------------------------------|
| (Employer) Clark County EMS | (Position) EMT-B - - EMT-P | (Start Date) 04/2008 | (End Date) 12/2008 |
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| (Contact Employer) Yes | (Reason for Leaving) No hours available to me. |
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| (Employer) Blessing Hospital | (Position) Er Tech-I | (Start Date) 10/2007 | (End Date) 04/2008 |
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| (Contact Employer) | (Reason for Leaving) School Schedule Conflict. |
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| (Employer) FedEx Ground | (Position) Package Handler | (Start Date) 01/2007 | (End Date) 10/2008 |
|-----------------------------------|--------------------------------------|--------------------------------|------------------------------|

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| (Contact Employer) | (Reason for Leaving) Graduated EMT-B course, hired with Blessing Hospital. |
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| (Employed Under Other Names) | No |
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MILITARY

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|--|--|---|------------------------------------|
| (Branch) U.S Army National Guard | (Dates of Service) June 11, 2009 --- Current | (Rank at Discharge) Private First Class | (Type of Dishcharge) N/A |
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| (Discharge Date) N/A | (Duties/Special Training) Military Intelligence. Intel Analyst. |
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HIGH SCHOOL

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|--------------------------------------|---------------------------------------|---------------------------------------|
| (School Name) Sage Academy | (School Address) Canter, MO | (Graduation Date) May, 2004 |
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COLLEGE

| | | |
|------------------|---------------|-------------|
| (College) | (From) | (To) |
|------------------|---------------|-------------|

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|---|--------------------------------------|--|-----------------------|
| John Wood Community College | | August, 2007 | September, 2008 |
| (Units) 48 Credit hours completed. Certificate of Completion for Paramedic program awarded. | (Major) Emergency medicine | (Degree) AAS in Emergency medicine, Not completed at this t | (Year) 2008 |

LICENSES & REGISTRATIONS

| | | | |
|--|---|--------------------------|--|
| (License/Registration) NREMT EMT-P License | (State & Number) National Reg. P8030590 | (Issuer) NREMT | (Expiration Date) 03/31/2011 |
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|--|--|--|--|
| (License/Registration) EMT-P License | (State & Number) MO. P-16461 | (Issuer) Missouri Department of Health and Senior Services | (Expiration Date) 10/31/2013 |
|--|--|--|--|

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|---------------------------------------|------------------------------------|--|--|
| (License/Registration) ACLS | (State & Number) N/A | (Issuer) American heart Association | (Expiration Date) 03/07/2010 |
|---------------------------------------|------------------------------------|--|--|

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|--------------------------------------|------------------------------------|--|-------------------------------------|
| (License/Registration) CPR | (State & Number) N/A | (Issuer) American Heart Association | (Expiration Date) 03/2011 |
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| (License/Registration) PHTLS | (State & Number) N/A | (Issuer) NAEMT | (Expiration Date) 04/2012 |
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CERTIFICATIONS

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MISCELLANEOUS FIRE DISTRICT INFORMATION

| | | |
|-----------------------------------|--|---|
| (Residency Program) Yes | (How Heard About BCFPD) Friend | (Emergency Services Organization) Yes |
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| (Service Department) Pike County EMS | (Position) Paramedic |
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|--|----------------------------|----------------------|--------------------------------|
| (Dates of Service) 09/2008 --- Current | (City) Louisiana | (State) MO | (Phone) 573-754-5531 |
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|--|-------------------------|--------------------------------------|--------------------------------|
| (Service Department) Clark County EMS | | (Position) EMT-B --- EMT-P | |
| (Dates of Service) 04/2008 --- 12/2008 | (City) Kahoka | (State) MO | (Phone) 660-727-3612 |

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|---|-------------------------|--|--------------------------------|
| (Service Department) Adams County EMS (For EMT-B and EMT-P clinicals) | | (Position) EMT-B --- EMT-P student | |
| (Dates of Service) 01-2007 --- 09-2008 | (City) Quincy | (State) IL | (Phone) 217-277-2001 |

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|---|-------------------------|-----------------------------------|--------------------------------|
| (Service Department) Quincy Fire Department | | (Position) QFD Explorer | |
| (Dates of Service) 01-2007 --- Current | (City) Quincy | (State) IL | (Phone) 217-228-4458 |

BCFPD KNOWN MEMBERS

| | |
|--------------------------------|------------------|
| (Name) Porter Wilson | (Station) |
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REFERENCES

| | | | |
|------------------------------------|--|---------------------------------|--------------------------------|
| (Name) Jordan Winemiller | (Address) S Kenwood St. Olathe, KS 66062 | (Relationship) Friend | (Phone) 913-620-7648 |
| (Name) Carlos DeGonzoles | (Address) 1121 S. 12th st. Apt B Quincy, IL 62301 | (Relationship) Friend | (Phone) 217-740-5626 |
| (Name) Robyn Key | (Address) 311 Vermont St. Apt 2 Quincy, IL 62301 | (Relationship) Friend | (Phone) 217-257-3936 |