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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *We consider all applicants for all positions without regard to race, color, religion, sex, national origin, marital status, veteran status or any other protected status.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Position(s) applied for: | | | | | | | | | Click | | | | | | | | | | | Date of application: | | | | | | | | | | | | | | | | Click | | | | | |
| How did you learn about us? | | | | | | | | | | Click | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Advertisement | | | | | | | Friend | | | | Walk-in | | | | | | | | | | Relative | | | | | | | | | | | Employment Agency | | | | | | | | | |
| Other: | | | Click | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | |  | |
| Last Name: | | | | Click | | | | | | First Name: | | | | | | | Click | | | | | | | | | | | Middle Name: | | | | | | | | | | | | Click | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Address: | | Click | | | | | | | | | | | | | | Apt.# | | | | | | | | Click | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City: | Click | | | | | | | | | | State: | | | | | Click | | | | | | | | | | | | | | | | | | Zip code: | | | | | | | Click |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Telephone Home: | | | | | | | Click | | | | | | | | | | | | | | | | Cell: | | | | | | | | Click | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Social Security #: | | | | | | Click | | | | | | | | | | Driver’s License #: | | | | | | | | | | | | | | | | | | Click | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Have you been convicted of a felony? Yes:  No: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| If yes, please explain: | | | | | | | | Click | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Conviction will not necessarily disqualify an applicant from employment.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **EDUCATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Check last year completed: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Elementary School High School Community College University | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 5 6 7 8 9 10 11 12  1 2 3 4  1 2 3 4 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| School name & location: | | | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Diploma or Degree: | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Describe course of study: | | | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Describe any specialized training, apprenticeship, skills, and extra-curricular activities: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| List any professional, trade, business, civic activities, or offices held: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **REFERENCES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Give name and telephone number of at least three references not related to you: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name: | | | | | | | | | | | | | | | | Phone Number: | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Click here to enter text. | | | | | | | | | | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Click here to enter text. | | | | | | | | | | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. Click here to enter text. | | | | | | | | | | | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **EXPERIENCE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employer name: | | | | | | Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Job title: | | | Click | | | | | | | | | Dates employed: | | | | | | | | | | | Click | | | | | | | | | | | | | to | | | Click | | |
| Address: | | | Click | | | | | | | | | City: | | | | Click | | | | | | | | | | | State: | | | | | | | Click | | | | Zip: | | | Click |
| Job supervisor: | | | | | Click | | | | | | | | | | | | | Telephone#: | | | | | | | | | | | | Click | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employer name: | | | | | | Click | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Job title: | | | Click | | | | | | | | | Dates employed: | | | | | | | | | | | Click | | | | | | | | | | | | | To | | | Click | | |
| Address: | | | Click | | | | | | | | | City: | | | Click | | | | | | | | | | | | State: | | | | | | | Click | | | Zip: | | | | Click |
| Job supervisor: | | | | | | Click | | | | | | | | | | | | | Telephone#: | | | | | | | | | | Click | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Employer name: Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Job title: | | | Click | | | | | | | | | | Dates employed: | | | | | | | | | | | | Click | | | | | | | | | | to | | | | Click | | |
| Address: | | | Click | | | | | | | | | | City: | | | Click | | | | | | | | | | State: | | | | | | | Click | | | | Zip: | | | | Click |
| Job supervisor: Click here to enter text. | | | | | | | | | | | | | | | | | | | | | | Telephone#: Click here to enter text. | | | | | | | | | | | | | | | | | | | |
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**APPLICANT’S STATEMENT**

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application.

I hereby acknowledge that any relationship with the District is of an “at will” nature, which means that the Applicant may resign at any time and the District, may discharge the Applicant at any time with or without cause. It is further understood this “at will” Applicant relationship may not be changed by any written document, including this application, or by conduct unless such change is specifically acknowledged in writing by the Fire Chief.

In the event of acceptance, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the District.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicants signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR DISTRICT USE ONLY**

Arrange interview: Yes \_\_\_\_\_ No \_\_\_\_\_

Remarks:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employed: Yes\_\_\_\_\_ No \_\_\_\_\_

Date Accepted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Fire Chief