



EMPLOYMENT APPLICATION

We are an equal employment opportunity employer. We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability or any other status which may be protected by Federal, State or local law.
Please complete the application in its entirety and be as accurate as possible. Be sure to print legibly and use ink.

Basic Information

Position(s) Applied for: _____ Application Date: _____

I am interested in: Volunteer Firefighter Professional Firefighter Full Time Part Time Temporary employment
 Other

If hired, I am available to start work on: _____

Last Name First Name Middle Initial Telephone Number Email Address

Address City State Zip Code

How Did You Hear About Us?

Employee Referral _____ Other _____

If hired, can you provide proof that you are legally eligible to work in the United States? Yes No

Are you 18 years of age or older? Yes No
(If no, proof of age may be required prior to starting work)

Have you applied with this company before? Yes No If Yes, please indicate when: _____

Have you ever worked at this company? Yes No If Yes, please indicate when: _____

Have you ever been convicted of a crime? Yes No If Yes, explain _____
(A conviction will not necessarily disqualify you for consideration)

Do you have a valid driver's license? Yes No
(For driving positions only)
Driver's License Number _____ Class of License _____ State License In _____

Have you had your driver's license suspended or revoked in the last 3 years? Yes No
If yes, give details: _____

Have you ever been asked to resign or been fired from a job? Yes No If Yes, explain _____

Education and Applicable Skills

	Institution Name and Contact Information	Graduated: Yes or No	Diploma/Degree or Certificate	Subject or Major
High School or GED				
Technical or Vocational				
College or University				
Other:				

List any academic honors, professional, trade or business activities and offices held. (Do not list any which reflect your race, color, religion, gender, national origin, age, disabilities or veteran status.)

Describe any additional skills, training, certifications, licenses etc you may have that relate to the job you are applying for:

Employment Information

Include your employment information beginning with your current or most recent employer first. Do not exclude employment and be sure to account for all periods of time; including unemployment, self-employment, and military service.

Job offers may be contingent on acceptable references from current and previous employers.

Company Name	Dates of Employment (month/year): From _____ To _____
Address, City, State, Zip Code	Wage/Salary: Starting \$ _____ per _____ Final \$ _____ per _____
Telephone Number	Job Title and Duties
Supervisor(s) Name	Reason for Leaving Employment
Company Name	Dates of Employment (month/year): From _____ To _____
Address, City, State, Zip Code	Wage/Salary: Starting \$ _____ per _____ Final \$ _____ per _____
Telephone Number	Job Title and Duties
Supervisor(s) Name	Reason for Leaving Employment
Company Name	Dates of Employment (month/year): From _____ To _____
Address, City, State, Zip Code	Wage/Salary: Starting \$ _____ per _____ Final \$ _____ per _____
Telephone Number	Job Title and Duties
Supervisor(s) Name	Reason for Leaving Employment

Reference Information

Please provide three references who are not former employers or relatives, who can provide professional reference information.

Name	Contact Information	Relationship	Years Known

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING AND SUBMITTING

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is true and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts may be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I hereby consent and understand that I may be required to submit to a pre-employment medical examination, a pre – and/or post-employment drug screen and background check as a condition of employment, if required. I understand that unsatisfactory results, refusal to cooperate with, or any attempt to affect the results of these pre/post employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all former employers, references, schools, courts and any others whether listed or not to provide relevant information that may be useful in making a hiring decision. I release all parties involved from any and all legal liability in providing such information.

I UNDERSTAND THAT SUBMISSION OF AN APPLICATION DOES NOT GUARANTEE EMPLOYMENT. I FURTHER UNDERSTAND THAT, THIS APPLICATION, VERBAL STATEMENTS MADE BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT, NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. I FURTHER UNDERSTAND THAT SHOULD AN OFFER OF EMPLOYMENT BE EXTENDED THAT EMPLOYMENT IS AT WILL, FOR NO SPECIFIED DURATION AND MAY BE TERMINATED BY EITHER THE COMPANY OR MYSELF AT ANY TIME, WITH OR WITHOUT CAUSE OR NOTICE. I UNDERSTAND THAT NO REPRESENTATIVE OF COMPANY EXCEPT THE PRESIDENT HAS THE AUTHORITY TO ENTER INTO ANY AGREEMENT GUARANTEEING ANY CONDITIONS OF EMPLOYMENT OR ANY AGREEMENT CONTRARY TO THE FOREGOING STATEMENTS AND THAT ANY SUCH AGREEMENTS MUST BE MADE IN WRITING AND SIGNED BY THE PRESIDENT OF THE COMPANY.

By signing I acknowledge that I have read, understand and agree to these statements. _____

Signature

Date