

# NORTH DOUGLAS COUNTY FIRE & EMS

## EMPLOYMENT/VOLUNTEER APPLICATION

*North Douglas Co. Fire makes its employment decisions without regard to race, color, sex, national origin, religion, marital status, age, prior industrial injury, mental or physical challenges or any other protected classification unrelated to job performance.*

*This application is considered current for \_\_\_\_\_ days, and for the position listed by you below.*

Position applied for \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_  
Last
First
Middle

Address \_\_\_\_\_  
Street/PO Box
City
State
Zip

Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Are you 18 years of age?  Yes  No

*It is the District's policy to comply with the provisions of the Immigration Reform and Control Act of 1989. If hired you would be required to provide verification of eligibility to work as established under Federal regulation*

Have you ever worked for this District before?  Yes  No Date worked \_\_\_\_\_

Position Held \_\_\_\_\_

Are you currently employed?  Yes  No May we contact your present employer?  Yes  No

Are you physically or otherwise unable to perform the duties of the job for which you are here applying?  
 Yes  No

### Education

Type of School	Name of School	Location	Number of yrs completed	Major/Degree
High School				
College				
Business/Trade School				
Professional School				

Please give any education related to position you are applying for.

## Work Experience

Company \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor \_\_\_\_\_ Dates worked \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Responsibilities & Equipment Operated \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Company \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor \_\_\_\_\_ Dates worked \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Responsibilities & Equipment Operated \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Company \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Supervisor \_\_\_\_\_ Dates worked \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Responsibilities & Equipment Operated \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## Professional, Trade, Business or Civic Activities and Offices held

*Please exclude any affiliations that may reveal race, color, sex, national origin, religion, marital status, age, prior industrial injury, mental or physical challenges or any other protected classification.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## References / Work

*Please provide the name, address and phone number of three current and previous employers.*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## References / Personal

*Please provide the name, address and phone number of three people, not relatives.*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Have you ever served in the U.S. Armed Forces?  Yes  No      Honorable Discharge  Yes  No

Do you have a Driver's License?  Yes  No    Driver's License Number \_\_\_\_\_ State issued \_\_\_\_\_

Have you had any accidents during the past three years?  Yes  No      How many? \_\_\_\_\_

Have you had any moving violations during the past three years?  Yes  No      How many? \_\_\_\_\_

By my signature I promise that the information provided in this application and the attached resume is true and complete, and I understand that any false information or significant omission may disqualify me from further consideration of employment, and may be justification for my dismissal from employment, if discovered at a later date. \_\_\_\_\_

I agree to notify the District immediately, if convicted of a felony, or any crime involving dishonesty or breach of trust while my application is pending or at any time while in the employ of the District. \_\_\_\_\_

I authorize the investigation of all statements contained in this application and the attached resume. I also authorize the District to contact my present employer (unless otherwise noted on this application form), past employers and references. I understand the District may request an investigative consumer report, that may include information as to my character, general reputation, personal characteristics and mode of living and that said report may involve personal interviews with my neighbors, friends, relatives, former employers, schools and others. I also understand that I have the right to request of the District the name and address of the consumer reporting agency, if I do so in a timely manner, in accordance with the Federal Fair Credit Reporting Act, so I may obtain full disclosure of the nature and scope of the investigation. \_\_\_\_\_

I authorize any person, school, current or past employer (except as previously noted), and organizations named in this application and the attached resume to provide the District with relevant information and opinion that may be useful to the District in making a hiring decision, and I release such persons and organizations from any legal liability in making such statements. \_\_\_\_\_

I give permission for a complete physical exam, including drug screening and X-rays, and consent to the release of any medical information found to the District, as may be deemed necessary by the District in judging my capability to perform the tasks pertinent to the position for which I am applying. \_\_\_\_\_

I understand that, if my employment is terminated by the District for dishonesty, breach of trust, or any criminal acts that the appropriate authorities may be notified and I may be criminally prosecuted. \_\_\_\_\_

I understand that, if hired I may not hold employment with, nor engage in sales or other activities that create a conflict of interest with my position with this District. \_\_\_\_\_

I understand that this application does not, in and of itself, create a contract of employment. I further understand and agree that, if hired, my employment is for no definite period of time, and may, regardless of the date of payment of my wages or salary, be terminated at any time. I understand that no person is authorized to change any of the terms mentioned in this employment application form. \_\_\_\_\_

If this employment application form is incomplete in any way, the District may not consider me for the position applied for. \_\_\_\_\_

I understand that I must provide on the appropriate form, a release for each employer, reference, school and organization herein mentioned. \_\_\_\_\_

Initial all blanks and sign \_\_\_\_\_ Date \_\_\_\_\_