

# EDNEYVILLE FIRE & RESCUE

## APPLICATION FOR EMPLOYMENT

(PLEASE FILL OUT IN FULL LEGIBLY BEFORE SUBMITTING)

### PERSONAL INFORMATION:

FULL NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DRIVERS LICENSE # : \_\_\_\_\_

PHONE # : \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

ARE YOU A U.S. CITIZEN? \_\_\_\_\_

HAVE YOU EVER BEEN A MEMBER OF THE ARMED FORCES? \_\_\_\_\_  
IF SO, GIVE DATES OF SERVICE AND TYPE OF DISCHARGE.

\_\_\_\_\_

HAVE YOU EVER BEEN ARRESTED OR CHARGED WITH A CRIME, INCLUDING  
DRIVING OFFENSES? \_\_\_\_\_

IF SO, GIVE DATES AND DETAILS OF CHARGES AND DISPOSTION.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### EDUCATION:

	Name/Location	Last Year Completed	Graduating Year	Degree Obtained
High School				
College				
Other				

## EMPLOYMENT:

List your present and past full or part-time jobs. Begin with the last (or current) job you held/hold. If you wish to add additional past employment, add an attached sheet.

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Work Phone Number: \_\_\_\_\_  
Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
Position Title: \_\_\_\_\_  
In your words, describe your work: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Work Phone Number: \_\_\_\_\_  
Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
Position Title: \_\_\_\_\_  
In your words, describe your work: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_  
Work Phone Number: \_\_\_\_\_  
Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
Position Title: \_\_\_\_\_  
In your words, describe your work: \_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

**PREVIOUS FIRE / RESCUE / EMS EXPERIENCE:**

Name of Department	Address	Chief	Years of Service	Highest Rank Achieved

CERTIFICATES OR SPECIALIZED TRAINING: \_\_\_\_\_

**REFERENCES:**

Give the names of three people not related to you whom you have known for at least a year

Name	Address	Phone Number	Years Acquainted

Having made application for employment at the Edneyville Fire & Rescue Department, I understand that the Edneyville Fire & Rescue Department will conduct an investigation of my character and fitness to serve in the Department. In connection with the investigation, I hereby authorize the release of information concerning my character and fitness to serve in the Edneyville Fire & Rescue Department by any school, college, law enforcement agency, government agency, physician, clinic, hospital, employer-past or present, organization clubs, association, or any other group or person who might have information concerning me. I agree to allow Edneyville Fire & Rescue to obtain a criminal background check from all States pending final employment and Edneyville Fire & Rescue reserves the right to accept or deny this application based on those results.

I hereby declare that all statements on this application are true and complete to the best of my knowledge, and agree to allow this application to remain the property of Edneyville Fire & Rescue Volunteer Dept, Inc. as part of my permanent records.

This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Applicant