

## Hampshire Fire Protection District Part-Time Firefighter Application

1.	Name				
	Last	fir			iddle
2.	List any other names yo	ou have used or	been known by	(include maid	len name)
3.	Address:				
	Number & Stre	et City		State	Zip
4.	Home Phone No. (				
5.	Cell Phone No. ( )_				
6.	Drivers License Info				
		te L		Cla	SS
7.	U.S. Citizen? Ye	s No			
	If No, are you an alien v	with evidence o	f intention to be	ecome a U.S. C	itizen?
	Yes	s No _			
LIST ALL F	ORMER ADDRESSES FOR	THE PAST TEN	(10) YEARS IN C	HRONOLOGICA	AL ORDER
8.	Address				
	Number & Stre	et	City	State	Zip
9.	Address		·		•
	Number & Stre		City	State	Zip
10	. Address		·		·
	Number & Stre		City	State	Zip
11	. Address		,		•
	Number & Stre		City	State	Zip
12	. Address		,		•
	Number & Stre		City	State	Zip

## **EDUCATION**

13. Circle Highest Grade Co	ompleted			
GED Certificate	High School	C	College 1 2 3	4
Graduate School	M.A.	Ph. D	Other	
Name and Address of S (Include City & State)	School	Date(s) Atto	ended	Graduate Yes No
14. High School				
15. Undergraduate Educat				
16. Graduate Education				
17. Trade Schools				
18. What college degrees I	have you attained	?		
	ONVICTION HISTO	RV		
<u>cc</u>	MANUELLON LIBIO	<u></u>		
20. Have you ever been co		e other than	n minor traff	fic violations?
Yes No				
If Yes, explain				

21.	List all traffic convictions	and acciden	its you have	had in the last	four years.
	Location (Town)	Date	Violat	ion	Disposition
	Location (Town)	Date	Violat	ion	Disposition
	Location (Town)	Date	Violat	ion	Disposition
	Location (Town)	Date	Violat	ion	Disposition
		EMPLO	YMENT HIST	<u>ORY</u>	
	List all jobs you have unemployment. Put you sequence with temporar	ır present jo	b first. Inclu		· ·
22.	Present employer's name		P	none	
	Address				
	Number & Stree Job Description	t	City	State	Zip
	Employed				
23.	Employer's name			Phone	
	Number & Stree Job Description		City	State	Zip
	Employed				
24.	Employer's name			_ Phone	
	Address				
	Number & Stree Job Description		City	State	Zip 
	Employed	to			

25.	Employer's name		Phone		
	Address				
	Number & Street		State	Zip	
	Job Description				
	Employed				
26.	Have you ever been suspende any prior employment? Yes			omic layoff, from	
27.	Have you ever resigned from unsatisfactory performance or				
	unsatisfactory performance of	wille under livestig	ation: 165	_ 110	
			If	yes, explain:	
		REFERENCES			
		REFERENCES			
	Please list three (3) adults not known you for more than thre asked to appraise your charact qualities.	ee (3) years. All persor	ns to whom you re	efer will be	
28.	Name	Address			
	Home Phone	Business Ph	ione		
	Occupation	Relationship	o		
29.	Name	Address			
	Home Phone	Business P	Phone		
	Occupation	Relations	hip		

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30.	Name	Address
		Business Phone
	Occupation	Relationship
31.	List organizations of which you are a ryou are applying:	member that relate to the position for which
32.	Explain your reasons for wanting to b	ecome a firefighter / Paramedic:
33.		ption for the position for which you are perform the essential job functions listed.
	Yes No	
34.	If accommodation is needed, please e	explain:
35.	Do you have a current CPAT Card? Ye	es No
36.	Person(s) to be notified in case of em-	ergency
	Name	_ Address
	Phone	

Name	Address	
Phone	Relationship	
Name	Address	
Dhono	Polationship	

## SUBMISSION OF DOCUMENTATION AND CREDENTIALS

37. I understand that I must provide COPIES of the following documentation and/or certifications at the time of application. EMT-A or P, CPR Card, Drivers License, Firefighter II / Basic, Firefighter III / Advanced, Hazardous Material Operations, FSVO, NIMS, Courage to be Safe, Technical Rescue Awareness.

I HEREBY CERTIFY THAT I HAVE READ THE ABOVE QUESTIONS AND STATEMENTS, AND I CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THIS QUESTIONAIRE, AND THAT ALL MY ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS ON THIS QUESTIONANAIRE OR AT ANY TIME DURING THE HIRING PROCESS MAY RESULT IN MY APPLICATION NO LONGER BEING CONSIDERED OR IN TERMINATION OF MY EMPLOYMENT WITH THE HAMPSHIRE FIRE PROTECTION DISTRICT.

Date:	 =		
Signature in Full:	 	 	

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age or physical or mental handicap. All information provided in this application will be treated confidentially, and will be used only to help assure the best use of your abilities if you are employed with us.

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## HAMPSHIRE FIRE PROTECTION DISTRICT AUTHORIZATION FORM

, hereby authorize the HAMPSHIRE FIRE PROTECTION DISTRICT and its
tatives to obtain and use all information relating to my previous and current
nal conviction history, personal characteristics, and all other information which may
upon my application for employment made to the HAMPSHIRE FIRE PROTECTION
release to the HAMPSHIRE FIRE PROTECTION DISTRICT of any and all medical
ysical examination I am required to undergo for employment with the HAMPSHIRE
urther release from liability any person or persons providing or receiving any such
this pre-employment investigation.
e that as a condition of employment with the HJAMPSHIRE FIRE PROTECTION
times a valid State of Illinois Driver's License, of the Class required to operate all
E PROTECTION DISTRICT. I do further agree that my failure to maintain said driver's
or withdrawal of a conditional offer of hire or just cause for my dismissal from
At time of hire, I must qualify for, obtain and maintain at all times a valid State of
n and EMT A/P License and CPR card. I do further agree that my failure to obtain ar
tions will constitute reason for withdrawal of a conditional offer of hire or just caus
nent with the District.
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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