

Star Fire Protection District

11665 W State St., Suite B Star, Idaho 208-286-7772

Employment Application

Applicant Information								
Full Name:	Last	First			M.I.	Date:		
Address:	Oter et Address					An autorau (II Io S II		
	Street Address					Apartment/Unit #		
	City				State	ZIP Code		
Phone:		E	Email					
Date Available: Social Security No.: Desired Salary:						red Salary: <u>\$</u>		
Position Applied for:								
YES NO Are you a citizen of the United States? YES NO ☐ ☐ If no, are you authorized to work in the U.S.? ☐ ☐								
Have you ever worked for this company? YES NO If yes, when?								
Education								
High School	:	Address:						
From:	To:	Did you graduate?	YES	NO	Diploma::			
College:		Address:						
From:	To:	Did you graduate?	YES	NO	Degree:			
Other:		Address:						
From:	То:	Did you graduate?	YES	NO	Degree:			

References Please list three professional references. Relationship: Full Name: Company: Phone: Address: Full Name: Relationship: Company: Phone: Address: Full Name: Relationship: Phone: Company: Address: **Previous Employment** Phone: Company: Supervisor: Address: Ending Salary: _____ Starting Salary:\$_____ Job Title: Responsibilities: _____ To:____ Reason for Leaving:____ From: YES NO May we contact your previous supervisor for a reference? Company: Phone: Address: Supervisor: Starting Salary:\$ Ending Salary: Job Title: Responsibilities: _____ To:___ From: Reason for Leaving: YES NO May we contact your previous supervisor for a reference?

Company:	Phone:
Address:	Supervisor:
Job Title:	Starting Salary:\$ Ending Salary:\$
Responsibilities:	
From: To:	
May we contact your previous supervisor for a refe	YES NO rence?
	Military Service
Branch:	From: To:
Rank at Discharge:	Type of Discharge:
If other than honorable, explain:	
	aimer and Signature
I certify that my answers are true and complete	to the best of my knowledge.
If this application leads to employment, I unders interview may result in my release.	tand that false or misleading information in my application or
Signature:	Date:

APPLICANTS CERTIFICATION, INFORMATION RELEASE & BACKGROUND CHECK AUTHORIZATAION

PLEASE READ CAREFULLY BEFORE SIGNING

I have completed this application myself; no one else has completed any part of it for me. The information provided on this application or on any information submitted with this application is true and complete to the best of my knowledge. I agree that falsified information or significant omissions will disqualify me from further consideration for employment and will be considered justification for dismissal if later discovered.

In order to permit the Star Fire Protection District to make a thorough investigation of my background, personal habits, and character for the purpose of determining my fitness and suitability for employment, I hereby release from liability and promise to hold harmless from any liability under any and all possible causes of legal action, any and all persons or entities who shall furnish any information or opinions regarding my background, personal habits, and/or character, whether or not that individual is specifically listed as a reference on this application.

I hereby authorize any person or entity who may be contacted by the Star Fire Protection District, its agents, or employees to release to such agents or employees any information, data, or opinions they may have regarding my background, criminal history, credit background, personal habits, character, qualifications, and/or job performance. I understand that the source of such information or opinions provided to the Star Fire Protection District shall be confidential and that the District shall not be required to reveal the content or source of any information or opinions.

I agree to hold harmless and release from liability under any and all possible causes of legal action, the Star Fire Protection District, its agents, and its employees, for any statements, acts, or omissions in the course of its investigation into my background, personal habits, and/or character.

I realize that it may be necessary for the Star Fire Protection District to thoroughly investigate my personal background and qualifications; and by applying for employment with the Star Fire Protection District, I expressly wave all my legal rights and causes of action to the extent that the Star Fire Protection District investigation (for purpose of evaluating my suitability for employment) may violate or infringe upon these aforementioned legal rights and causes of action of mine.

This release from liability given by me to the Star Fire Protection District, its employees, or agents, and all others as heretofore provided, shall apply to any right of action that might accrue to me, my heirs, and/or my personal representatives.

Signature:	Date:
Printed Name:	
Social Security No.	