APPLICATION FOR EMPLOYMENT



Northern Arizona Fire District 2600 E Northern Ave, Kingman, AZ 86409 Phone: 928-757-3151 Website: www.northernazfire.com Email: nafd@northernazfire.com



Golden Valley Fire District 749 S Egar Road, Golden Valley, AZ 86413 Phone: 928-565-3479 Website: www.goldenvalleyfire.org Email: gvfd@goldenvalleyfire.org

APPLICANT INFORMATION

Full Name:	Date:				
Last First	M.I.				
Address:					
Street Address	City State Zip Code				
Home Phone: () Cell Phone: (()E-mail:				
Position Applied for:	Full-time Part-time Volunteer/Trainee				
Date Available: Desired Salary: \$					
Are you 18 years of age or older? Yes No Yes No Yes No If no, when will you be 18? Do you possess a valid driver's license? If yes, what state? Yes No Yes No Yes No If no, are you authorized to work in the U.S.? Are you a citizen of the United States? If no, are you authorized to work in the U.S.? Have you ever worked for GVFD or NAFD? If yes, which district and when? Yes No Yes No If yes, explain:					
EDUCATION					
High School:	City:State:				
From:To:Did you graduate?	Yes No Diploma GED				
College:	City:State:				
From:To:Did you graduate?	Yes No Degree: Attach copy				
Other Training:	City:State:				
From:To:Did you graduate?	Yes No Certificate: Attach Copy				
Other Training:	City:State:				
From:To:Did you graduate?	Yes No Certificate: Attach Copy				

EDUCATION (CONT.)

In the space below, list any additional training you have acquired that might apply to the position you are applying for. List course or training name, description of training, who provided training, any certificate issued and dates. Attach copies of any certificates earned.

REFERENCES				
Please list three professional references.				
Full Name:	Relationship:			
Company:	Phone: ()			
Address:				
Full Name:	Relationship:			
Company:	Phone: ()			
Address:				
Full Name:	Relationship:			
Company:	Phone: ()			
Address:				
PR	REVIOUS EMPLOYMENT			
Company:	Phone: ()			
Address:	Supervisor:			
Job Title:	Starting Salary: \$Ending Salary: \$			
Responsibilities:				
From:To:	Reason for Leaving:			
May we contact this employer for a reference?	Yes No			
Company:	Phone: ()			
Address:	Supervisor:			
Job Title:	_Starting Salary: \$Ending Salary: \$			
Responsibilities:				
From:To:	Reason for Leaving: Yes No			
May we contact this employer for a reference?	Yes No			

PREVIOUS EMPLOYMENT (CONT.)

Company:		_Phone: ()	
Address:	Supervisor:		
Job Title:	Starting Salary: \$	_Ending Salary: \$	
Responsibilities:			
From:To:	_Reason for Leaving: Yes No		
May we contact this employer for a reference?	Yes No		
MILITARY SERVICE			
Branch:	From:	То:	
Rank at Discharge:	Type of Discharge:		
If other than honorable, explain:			

DISCLAIMER and SIGNATURE

I certify that the information provided in this application is true and complete to the best of my knowledge.

If this application leads to employment, I understand that false, misleading, incomplete information in my application or interview may result in termination of employment.

Signature_____Date_____