

**Acton Fire-Rescue**

1725 Route 109 Acton, ME 04001

Phone: 207-636-3230



**Application for Employment**

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. PLEASE PRINT, except for signature on the application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Name: \_\_\_\_\_

Last

First

Middle Initial

Current Address: \_\_\_\_\_

How long have you lived there? \_\_\_\_\_

**Contact Information**

Phone Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Driving Information**

Driver's License Number \_\_\_\_\_ Driver's License Class: \_\_\_\_\_

State Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Education**

Do you have a high school diploma or GED? \_\_\_\_\_

Where is your diploma or GED from? \_\_\_\_\_

Please attach a full resume, certifications relating to Fire/EMS, and three references.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_