



Back Mountain Regional Fire & EMS, Inc.
Headquarters
184 East Center Hill Road
P.O. Box 176
Dallas, PA 18612

FIREFIGHTER EMPLOYMENT APPLICATION

Full Time: _____ Part Time: _____

PERSONAL DATA:

Name: (Last): _____ (First): _____ (Middle): _____

Address: Street _____ City: _____ State: _____ Zip: _____

Phone Home: _____ Work: _____ Cell: _____ Email: _____

DRIVER QUALIFICATIONS:

State of Issuance: _____ License Number: _____ Expiration Date: _____

Class: _____ Restrictions: _____

Has your driver's license, permit or privilege to operate a motor vehicle been suspended or revoked during the past 3 years? Yes ___ No ___

Have you ever been arrested and/or convicted of a criminal or motor vehicle violation(s)? Yes ___ No ___

If yes to either question, please explain (use a separate sheet if necessary) _____

(This information will be used to investigate your driving record for the preceding three (3) years)

EXPERIENCE:

Have you ever been a member of a fire department, rescue squad or similar organization? Yes ___ No ___

If yes, name of organization: _____

Address: Street _____ City: _____ State: _____ Zip: _____

Position(s) held: _____ Reason for leaving: _____

Have you ever applied to Back Mountain Regional Fire and EMS, Inc.? Yes ___ No ___ Reason for leaving: _____

High School, College or Vocational Training: _____

CERTIFICATIONS:

First Responder ___ EMT ___ Paramedic ___ Emergency Vehicle Operator ___ Haz-Mat R&I ___ Haz-Mat Ops ___ Haz-Mat Tech ___

Essentials of Firefighting ___ Firefighter 1 ___ Firefighter 2 ___ Pump Ops 1 ___ Pump Ops 2 ___ Basic Vehicle Rescue ___

Rescue Technician ___ PA130 ___ PA190 ___ Other: _____

(Include copies of all certificates and certifications with application)



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Employment History:

List your last three employers, starting with the most recent

Employer: _____ Telephone Number: _____

Address: Street _____ City: _____ State: ____ Zip: _____

Job Title: _____ Start Date: _____ End Date: _____

Salary: _____ Supervisor: _____ May we contact: Yes ____ No ____

Reason for leaving: _____

Employer: _____ Telephone Number: _____

Address: Street _____ City: _____ State: ____ Zip: _____

Job Title: _____ Start Date: _____ End Date: _____

Salary: _____ Supervisor: _____ May we contact: Yes ____ No ____

Reason for leaving: _____

Employer: _____ Telephone Number: _____

Address: Street _____ City: _____ State: ____ Zip: _____

Job Title: _____ Start Date: _____ End Date: _____

Salary: _____ Supervisor: _____ May we contact: Yes ____ No ____

Reason for leaving: _____



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References:

Name: _____ Relationship: _____

Address: Street _____ City: _____ State: _____ Zip: _____

Phone Home: _____ Work: _____ Cell: _____ Email: _____

Name: _____ Relationship: _____

Address: Street _____ City: _____ State: _____ Zip: _____

Phone Home: _____ Work: _____ Cell: _____ Email: _____

Name: _____ Relationship: _____

Address: Street _____ City: _____ State: _____ Zip: _____

Phone Home: _____ Work: _____ Cell: _____ Email: _____

DECLARATION

The information on this application is accurate and subject to verification by Back Mountain Regional Fire and EMS, Inc. I understand the furnishing of any misleading or incorrect information may result in termination of my employment. I hereby give permission to Back Mountain Regional Fire and EMS, Inc. or its duly authorized representative to contact any persons, companies or educational institutions name in this application. I agree that I will not disclose or use in connection with my association with Back Mountain Regional Fire and EMS, Inc. any confidential or proprietary information. I understand that my employment with Back Mountain Regional Fire and EMS, Inc. is at will and that such employment may be terminated at any time by myself or Back Mountain Regional Fire and EMS, Inc. I further agree to abide by all By-Laws, Rules and Regulations as set forth governing employment in Back Mountain Regional Fire and EMS, Inc. I do certify that this application was completed by me and that all entries and information contained therein are true and complete to the best of my knowledge.

Signature of Applicant: _____ Date: _____

Back Mountain Regional Fire & EMS, Inc. may accept or reject any and all applications

(Department Use Only)

Interview Conducted by:

_____ Date: _____

_____ Date: _____

_____ Date: _____

Date Application Approved: _____