



# DeSoto Parish Fire District 9 Employment Application

NAME:	FIRST:	MIDDLE:	LAST:
STREET ADDRESS/ P.O. BOX NO.		CITY/TOWN	STATE/ZIP
HOME TELEPHONE NUMBER (WITH AREA CODE) (    )		OFFICE TELEPHONE NUMBER (WITH AREA CODE)	
SOCIAL SECURITY NUMBER		DATE OF BIRTH: MONTH/ DATE/ YEAR:	
ARE YOU A CITIZEN OF THE UNITED STATES? YES            NO		DRIVER'S LICENSE NO: _____ EXPIRATION DATE:        _____	
POSITION FOR WHICH YOU ARE APPLYING:			
RACE/SEX INFORMATION			
The Federal Government requires that we request the following race and sex information for statistical reporting purposes. Completion of this section is voluntary, and your application will not be rejected if you choose not to provide this information.			
MALE            White        Black        Hispanic    Am.Indian Asian			
FEMALE            Other:			
SPECIAL INSTRUCTIONS FOR DOCUMENTATION YOU MUST ATTACH			
Applicant must possess one of the following: high school diploma, high school equivalency certificate, high school transcript, affidavit from the issuing high school, associate's or bachelor's degree, or college transcript, any one of which must indicate that graduation has occurred or a degree awarded. Any Louisiana applicant who presents a home study diploma shall submit necessary documentation indicating Louisiana Board of Elementary and Secondary Education (BESE) approval of the home study curriculum. Non-Louisiana applicants shall be required to present proof of completion of a high school curriculum which has been accredited by the applicant's state, or its state-approved agency. A certification of completion shall not be sufficient to substitute for a diploma or equivalency certificate.			
*Proof that you are a citizen of the United States (Birth Certificate, US Passport, or Certificate of Naturalization)			
*Proof that you are at least eighteen (18) years of age (Birth Certificate)			
*Proof that you meet the education requirements as listed above			
*Proof that you have a valid driver's license			
<b>*If you have a Civil Service Test Score, please attach a copy to this completed application</b>			
AUTHORIZATION FOR RELEASE OF INFORMATION			
I HAVE COMPLETED THIS APPLICATION WITH THE KNOWLEDGE AND UNDERSTANDING THAT ANY OR ALL ITEMS CONTAINED HEREIN MAY BE SUBJECT TO INVESTIGATION PRESCRIBED BY LAW, AND I CONSENT TO THE RELEASE OF INFORMATION CONCERNING MY CAPACITY AND FITNESS BY EMPLOYERS, EDUCATIONAL INSTITUTIONS, LAW ENFORCEMENT AGENCIES, AND OTHER INDIVIDUALS AND AGENCIES, TO DULY ACCREDITED INVESTIGATORS, CIVIL SERVICE BOARD MEMBERS AND OTHER AUTHORIZED EMPLOYEES OF THE GOVERNMENT FOR THAT PURPOSE.			
DATE	SIGNATURE OF APPLICANT		



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## BACKGROUND INFORMATION

1 WITHIN THE PAST 5 YEARS, HAVE YOU BEEN TERMINATED, OR RESIGNED IN LIEU OF TERMINATION, FROM ANY POSITION FOR REASONS OTHER THAN A REDUCTION IN FORCE?

YES NO

NOTE: IF YOU ANSWERED "YES" TO THIS QUESTION, PLEASE PROVIDE AN EXPLANATION IN THE EXPLANATION BLOCK PROVIDED BELOW.

2 HAVE YOU EVER BEEN CONVICTED OF A FELONY?

YES NO

3 HAVE YOU BEEN CONVICTED OF A MISDEMEANOR DURING THE LAST 3 YEARS?

YES NO

NOTE: IF YOU ANSWERED "YES" TO EITHER OF THE ABOVE QUESTIONS, PLEASE PROVIDE AN EXPLANATION IN THE EXPLANATION BLOCK BELOW. A CONVICTION WILL NOT NECESSARILY DISQUALIFY YOU FROM THE JOB FOR WHICH YOU ARE APPLYING. A CONVICTION WILL BE JUDGED ON ITS OWN MERITS WITH RESPECT TO TIME, CIRCUMSTANCES AND SERIOUSNESS.

**EXPLANATION.** PLEASE USE THE SPACE PROVIDED BELOW TO EXPLAIN ANY "YES" ANSWERS TO THE ABOVE THREE QUESTIONS. ATTACH ADDITIONAL PAGES IF NECESSARY.

## TRAINING/EDUCATION

A. HIGH SCHOOL DIPLOMA OR EQUIVALENCY CERTIFICATE DATE RECEIVED: _____  I DID NOT GRADUATE, BUT COMPLETED GRADE: _____	NAME AND ADDRESS OF HIGH SCHOOL ISSUING DIPLOMA OR; STATE DEPT OF EDUCATION ISSUING GED OR EQUIVALENCY CERTIFICATE:
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B. COLLEGE NAME OF COLLEGE OR UNIVERSITY/ LOCATION	YEARS ATTENDED	CREDIT HOURS EARNED	DEGREE(S) RECEIVED	DATE OF DEGREE	MAJOR





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LIST ANY SPECIAL COURSE WORK, TRAINING, OR EXPERIENCE WHICH MAY BE BENEFICIAL IN THE JOB FOR WHICH YOU ARE APPLYING, OR WHICH MAY SATISFY ANY SPECIAL QUALIFICATION REQUIREMENTS.



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**INSTRUCTIONS FOR COMPLETING SECTION ON WORK EXPERIENCE**

Start with your present or most recent position and work back, including any military experience. Use separate blocks if you were promoted or your duties changed materially while working for the same employer. Treat each change as a separate position. For volunteer experience, use work experience blocks and disregard reference to salary. It is to your advantage to completely describe your duties in each position, placing particular emphasis on duties, tasks performed, and responsibility. Attach additional pages if necessary.

NAME AND COMPLETE ADDRESS OF EMPLOYER:	TYPE OF BUSINESS
TITLE OF YOUR POSITION	

DATES OF EMPLOYMENT	WAS THIS FULL-TIME EMPLOYMENT?	NUMBER OF HOURS WORKED PER WEEK:	BEGINNING SALARY:	ENDING SALARY:
FROM: _____ TO: _____	YES      NO			

NAME AND TITLE OF IMMEDIATE SUPERVISOR:	NUMBER/ TITLES OF EMPLOYEES YOU SUPERVISED:
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DESCRIBE YOUR DUTIES IN DETAIL (USE A SEPARATE SHEET IF NECESSARY):




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DATES OF EMPLOYMENT		WAS THIS FULL- YES      NO	NUMBER OF HOURS WORKED PER	BEGINNING SALARY:	ENDING SALARY:
FROM:	TO:				
NAME AND TITLE OF IMMEDIATE SUPERVISOR:		NUMBER/ TITLES OF EMPLOYEES YOU SUPERVISED:			
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FROM:	TO:	YES	NO	HOURS WORKED PER	SALARY:	SALARY:
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