Columbus Rural Fire District #3

PO Box285
Columbus Mt 59019
Phone: (406)322-4302
FAX: (406) 322-5202

Email:ccowger@columbusfirerescue.com
OR
njacobs@columbusfirerescue.com

Application for Fuels Crew member - full time seasonal

INDIVIDUAL DATA

Last	First	MI	Date of Application	Email

Address	City	State	Zip Code

Are you over the age of 18? ☐Yes ☐No	Home Phone	Work Phone	Cell Phone

Emergency Contact Name	Phone	Relationship

Are there currently any criminal charges pending against you? ☐Yes ☐No

Have you ever been convicted of a misdemeanor or felony? ☐Yes ☐No
If yes, please explain: _____
All accepted volunteers/employees must complete a criminal background check and a credit history report.

Have you resided in another State? DYes ☐No If yes, when _/_/_ to _/_/_ and where:
_____ I _____
City State

DRIVER INFORMATION

Do you have a valid Driver's License? ☐Yes ☐No
Driver's License#: _____
State: _____
Date Expires: _____ I _____ I _____

Type of license held:
D Operator
D Commercial Operator
D Chauffer

How many years have you been driving? D Less than 1 year D 2-3 years D Over 3 years

Do you have any restrictions on your license? D Yes ☐No If yes, please explain: _____
_____

Have you had any moving violations (excluding parking tickets) or accidents in the past 5 years? ☐Yes ☐No
If yes, document below

Month/Year	Description of Violation

EMPLOYMENT EXPERIENCE

Start with your present or last job, not to exceed the past seven years. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

ACCOUNT FOR ANY GAPS IN EMPLOYMENT.

IF YOU NEED ADDITIONAL SPACE, PLEASE CONTINUE ON A SEPARATE SHEET OF PAPER

Employer:			Dates Employed From: ___/___/___ To: ___/___/___
Address	City	State	Zip Code
Phone Number:		May we contact this employer? ❑ Yes ❑ No	
Your Last Job Title:	Supervisor:		
Work Performed: List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
Reason for leaving : ❑ Terminated ❑ Resigned ❑ Layoff ❑ Other			

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Address	City	State	Zip Code
Phone Number:		May we contact this employer? ❑ Yes ❑ No	
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Work Performed: List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
Reason for leaving : ❑ Terminated ❑ Resigned ❑ Layoff ❑ Other			

EDUCATION

Are you attending school now? ❑Yes ❑ No Course of Study:

High School	City/State	Graduate ❑Yes ❑ No	Degree/Major
College	City/State	Graduate ❑Yes ❑ No	Degree/Major
Bus. or Trade School	City/State	Graduate ❑Yes ❑ No	Degree/Major
Graduate Studies	City/State	Graduate ❑Yes ❑ No	Degree/Major

ORGANIZATIONS/HOBBIES/INTERESTS

List any hobbies, special areas of interest and other volunteer positions

RELATED EXPERIENCE

Have you ever volunteered on a fire department before? ❑Yes ❑ No

Name	City/State	Phone Number	Chief Officer

Please describe past fire and/or EMS training:

List current certifications (FF1, EMT-B, etc.)

ADDITIONAL INFORMATION

How did you learn about the Columbus Rural Fire District?

Why do you want to become a member of the Columbus Rural Fire District?

Do you know anyone who has or is currently serving with the Columbus Rural Fire District? ❑Yes ❑ No
If yes, name of person:

PERSONAL CHARACTER REFERENCES

Name			Phone #
City	State	Zip Code	Occupation: Relationship:
Name			Phone #
City	State	Zip Code	Occupation: Relationship:
Name			Phone #
City	State	Zip Code	Occupation: Relationship:

MILITARY SERVICE RECORD

Were you in the Armed Forces? ❑ Yes ❑ No If yes, what branch? _____
Date(s) of Duty? ___/___/___ to ___/___/___
Rank and Status current or at time of discharge _____
List any special training obtained:

HEALTH

Have you reviewed the position description for which you are applying? ❑ Yes ❑ No
Do you have any conditions (physical or mental) that may affect your performance as volunteer/employee in any way? ❑ Yes ❑ No If yes, please describe:

Are you capable of performing in a reasonable manner the essential functions of the position, with or without a reasonable accommodation? ❑ Yes ❑ No

APPLICANT'S STATEMENT – ACKNOWLEDGEMENT - AGREEMENT

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading, false, incomplete, misrepresented statements will constitute sufficient cause for denying volunteer membership.

I understand that neither the acceptance of this application nor the subsequent entry into any type of relationship with the Columbus Rural Fire District creates an actual or implied contract of employment. I understand that if I accept a position it will be on a volunteer basis. This means that either Columbus Rural Fire District or I have the right to terminate the relationship at any time, for any reason, with or without cause.

I authorize the Fire Departments to investigate information concerning my education, employment experiences and

all other aspects of my background relevant to my proposed volunteer position. I release the Columbus Rural Fire District and its members from all liability arising from such investigation.

My signature indicates that I have read, understand and agree to all of the above.

Signature of applicant:_____ Date: ____/___/_____

***Non-Discrimination: The Columbus Rural Fire District does not discriminate on the basis of age, race, color, national origin, sex, sexual preference, marital status, creed, or political belief, mental or physical handicap or disability, or status as a disabled veteran in its employment/volunteer policies and practices.**

OFFICE USE ONLY

Application received: ____/____/_____	**Date of Interview: ____/____/_____**
Interview Team:	
Date accepted: ____/_____/_____	**Date rejected: ____/_____/_____**

NOTES

IF APPLICANT IS ACCEPTED - FILL IN THE BELOW INFORMATION:

Date of Birth:	**SSN:**