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APPLICATION FOR EMPLOYMENT

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***This application is for the position of:***

*Paid, Full-time;*  *Volunteer;* *Student/Resident Intern;*

*Other: \_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_*

Date of application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Boardman Rural Fire Protection District (District) makes its employment decisions without regard to race, color, sex, national origin, religion, marital status, age, prior industrial injury, or mental or physical handicaps unrelated to job performance. Boardman Rural Fire Protection District is an EOE/ADA/Drug-Free Workplace Employer.

This application will be considered only for the specific job applied for. If you desire to be considered for another position at a future time, you must file a new application. This application is for employment in full-time as well as paid, part-time (volunteer) and resident volunteer positions.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Social Security No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(First) (Middle) (Last)*

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Driver’s license # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; State issued \_\_\_\_\_\_\_\_\_

It is the District’s policy to comply with the provisions of the Immigration Reform and Control Act of 1986 and to hire only authorized workers. If you are hired, you will be asked to provide verification of your work eligibility. The types of verification required may change from time to time as federal regulations are promulgated or amended. Your employment will not be continued if you are unable or unwilling to provide the verification requested by the District.

Do you have any of the following certifications (you will be asked to provide certificates)?

 Yes  No DPSST Basic Firefighter

 Yes  No DPSST/NFPA Firefighter I

 Yes  No DPSST Fire Ground Leader

 Yes  No Oregon EMT Basic or above

 Yes  No NREMT EMT Basic or above

 Yes  No NFPA Driver or above

Please describe any other education, training, qualifications, or skills that you think are relevant to the position for which you are applying. Use additional sheets if necessary.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever worked or volunteered for the District before?  Yes  No

If so, list the beginning and ending dates worked \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position(s) held \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you become aware of this opening? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any relatives, either by blood or marriage, who currently work for the District or who are members of the board of directors of the District?  Yes  No

If yes, give their name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Previous Work Experience

Please list all employment and any periods of unemployment for the last 10 years, beginning with the most recent employment. Include US military experience; **DO NOT** include any reference to type of discharge, only date of separation. Attach additional sheets as necessary.

1. Company name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone No.: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immediate supervisor’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First date employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Last date employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position(s) held: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job responsibilities, equipment operated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Company name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone No.: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immediate supervisor’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First date employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Last date employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position(s) held: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job responsibilities, equipment operated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Company name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone No.: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immediate supervisor’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First date employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Last date employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position(s) held: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job responsibilities, equipment operated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May we make inquiries of your current employer?  Yes,  No

**Personal References**

List three persons **other than relatives or previous employers** who have known you longer than one year. **Do not include any person who lives in your household**.

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| --- | --- | --- |
| **Name** |  **Address and phone** |  |
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The nature of our business requires some of our paid, full-time employees to work 24-hour shifts on a rotating basis. **If you are applying for one of these positions,** indicate below any reason you would not be able to work a full 24-hour shift. Use additional sheets if necessary.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A job description detailing the functions and duties of the job for which you are applying is attached. Are there any functions or duties listed which you would be unable to perform? If so, please explain. Use additional sheets if necessary.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you sustained within the last 10 years any criminal convictions (other than traffic infractions)?

** Yes  No.** If yes, list them on a separate sheet of paper. Include the nature of offense leading to the conviction(s), date of conviction(s), and sentence(s) imposed. You will not be automatically excluded from consideration if you have been convicted of a crime. Your suitability for the position sought will be evaluated based upon the totality of circumstances, such as the nature of the crime, the timelines of the conviction, and the type of work involved.

In submitting this application for employment (and attached resume, if any), I authorize investigation of all statements contained in it; and it is understood and agreed that any misrepresentation by me in this application (or attached resume, if any) may result in cancellation of the application and/or separation from the District’s service if I have been employed. I agree that I will undergo a physical examination at the District’s expense, if requested by the District, and that a physical examination may include a drug screen. This is considered a safety-sensitive position.

In consideration of any employment, I agree to conform to the rules and regulations of the District. Unless my position is subject to the terms of the bargaining agreement, my employment and compensation can be terminated, with or without cause and with or without notice, at any time at the option of either the District or myself. I understand that no representative of the District except the Fire Chief or the Board of Directors has the authority to enter into any agreement for any specified time or to make any agreement contrary to the foregoing. I certify I have read all of this application and the information I have provided above is true and correct.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Unsigned or incomplete applications will be rejected*

**RELEASE AND WAIVER**

**IMPORTANT – Please read carefully and initial each paragraph below before signing this Release and Waiver.**

By my signature and initials placed below:

I promise that the information provided in this employment application (and accompanying resume, if any) is true and complete; and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify the District if I should be convicted of a felony or any crime involving dishonesty or a breach of trust while my job application is pending or during my period of employment if hired.

 \_\_\_\_\_\_\_\_\_\_\_ Initials

I authorize the investigation of all statements contained in this application (and accompanying resume, if any). I also authorize the District to contact my present employer (unless otherwise noted in this application), past employers, listed references and any other person or entity with knowledge of me. I understand that if my position is one that warrants such an inquiry, the District may request an investigative consumer report from a consumer reporting agency that includes information as to my character, general reputation, personal characteristics, and mode of living. I understand that the investigative consumer report may involve personal interviews with my neighbors, friends, relatives, former employers, schools and others. I also understand that under the Federal Fair Credit Reporting Act I have the right to make a written request to the District, within a reasonable time, for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation.

\_\_\_\_\_\_\_\_\_\_\_ Initials

I authorize any person, school, current employer (except as previously noted), past employers, and organizations named in this application (and accompanying resume, if any) and any other person or entity with knowledge of me to provide the District with any information and opinion which the District regards as useful to it in making a hiring decision; and I release such persons and organizations from any legal liability in making such statements or furnishing any and all information that the District may seek.

\_\_\_\_\_\_\_\_\_\_\_ Initials

Any offer of employment with Boardman Rural Fire Protection District (BRFPD) may be conditional on criminal and driving background checks, physical examination and drug testing. Most positions with BRFPD are safety sensitive.

\_\_\_\_\_\_\_\_\_\_\_ Initials

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Unsigned or incomplete waiver will result in rejection of the application.*