



Lake Mohave Ranchos Fire District

16126 Pierce Ferry Road
P.O. Box 611

Phone (928) 767-3300

Dolan Springs, Arizona 86441

Fax (928) 767-3301



APPLICATION for VOLUNTEER SUPPORT SERVICES:
SUPPRESSION, EMS, MAINTENANCE, OTHER SUPPORT SERVICES POSITIONS

WHEN COMPLETED PLEASE RETURN TO:

info@lmrfd.org or mail to P.O. Box 611, Dolan Springs, Az., 86441

(no phone calls, please)

Submittal of a resume is not acceptable as a substitute for this completed application form.
Complete all sections. Use of the term "unknown" is not acceptable.
Please print all information.

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis, including race, color, age, sex, religion, disability or national origin. Applicants may request accommodations needed to participate in the application process consistent with "The Americans with Disabilities Act."

VOLUNTEER SUPPORT POSITION FOR WHICH YOU ARE APPLYING (circle all that apply)

SUPPRESSION, EMS, Maintenance, Other Support Services

Last Name _____ First _____ Middle _____

Other Names Used or Known By _____

Mailing Address _____ City _____ State _____ Zip _____

Present Street Address (if different from mailing address) _____

Telephone () _____ Work Phone () _____ Cell Phone () _____

List all residences for the past three years:

Address:		City:	State:	Zip:
From:	To:	Reason moved:		
Address:		City:	State:	Zip:

From:	To:	Reason moved:		
Address:		City:	State:	Zip:
From:	To:	Reason moved:		

PERSONAL DATA:

Email Address: _____

Date of Birth: _____

Social Security Number: _____

Place of birth: (City / County / State) _____

Are you 18 years of age or older? _____ Yes _____ No

Do you possess a valid Arizona Driver's License? _____ Yes _____ No

If yes, provide number: _____

Is there any reason you could not acquire an Arizona Driver's License? _____ Yes _____ No

If yes, explain: _____

Other States you have possessed a Driver's License: _____

Education and Training

Did you graduate from high school? _____ YES _____ NO

Do you have a GED? _____ Yes _____ NO (Required to provide a copy of either high school diploma or GED.)

List all colleges, universities and technical schools attended; most recent first.

School Name:		
Address:		
Dates attended: From:	To:	Semester hours earned:
Degree attained / year:		Major:

School Name:

Address:		
Dates attended: From:	To:	Semester hours earned:
Degree attained / year:		Major:
School Name:		
Address:		
Dates attended: From:	To:	Semester hours earned:
Degree attained / year:		Major:

In the space below, list any training you have acquired that might apply to the position you are seeking. (You will be required to provide proof of course(s)/training(s) and/or copies of certificate(s) for all listed course(s)/training(s).

Employment History

Please list most recent first. If presently employed, may we contact your employer? Yes No

Employer's Name:	Type of business:	
Complete Address:		
Phone Number: ()	Supervisor's Name:	
Job Title / Description:		
Worked from: (mo / yr)	To: (mo / yr)	Reason for leaving:

Employer's Name:	Type of business:
Complete Address:	

Phone Number: ()		Supervisor's Name:
Job Title / Description:		
Worked from: (mo / yr)	To: (mo / yr)	Reason for leaving:

Employer's Name:		Type of business:
Complete Address:		
Phone Number: ()		Supervisor's Name:
Job Title / Description:		
Worked from: (mo / yr)	To: (mo / yr)	Reason for leaving:

Please, provide any additional comments or information that would be of assistance in considering you for this position. Use separate sheet of paper if necessary.

DRIVING HISTORY: Have you ever had your Driver's License revoked or suspended? If so, list date and location of each occurrence and reasons for revocations or suspended. Use separate sheet of paper if needed.

All persons applying for a position with the Lake Mohave Ranchos Fire District will be required to provide the documents listed below as applicable to the position for which they have applied. Originals and photocopies are acceptable and may be submitted with the application. However, all required documents must be on file prior to an offer of employment being made for all positions. All photocopied documents are subject to verification, and documents not provided as required will subject the applicant to termination of consideration for employment.

The following documents are required, from all applicants regardless of position for which they have applied. Please, check mark in space provided if documents are attached to the volunteer application.

- Social Security Card
- G. E. D. or High School Diploma
- College Transcripts -or- College Degrees

The following documents are required for emergency services personnel positions, except as noted.

- Current Driver's License
- National Registry & State EMT Certification (Administrative applicants excluded)

- ____ Advanced Life Support Certifications (if applicable) (Administrative applicants excluded)
 - ____ CPR Card (Administrative applicants excluded.)
 - ____ Professional Licenses, Registrations and Certificates
 - ____ Certificates of Training (Job related)
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STATEMENT OF UNDERSTANDING

I authorize VERIFICATION of all information contained herein and specifically authorize the employers and references to give you any and all information concerning me until _____.

I further agree to submit to alcohol and drug screening tests, if requested of me, at any time prior to, or during my employment, including but not limited to urinalysis test, polygraph test, blood test, hair sampling, random or announced testing, with or without suspicion.

The District utilizes basic common-sense rules, standards, guidelines and practices in its day-to-day work requirements and services. Only some of these rules, standards, etc., are in written form. However, both the written and unwritten standards of service and job performance are in effect. The rules, standards, guidelines, and practices (often referred to as “policies”) may be amended from time to time at the discretion of the District. I agree to conform to District policies, practices, rules, regulations, and guidelines.

District property and District premises include lockers, closets, or other receptacles for storing personal property. The District reserves the right to inspect or search lockers, etc., in the event grounds exist for such inspection or search, or on a random basis. The grounds may include questions, suspicions or investigation of theft or missing property (District or otherwise), possession of alcoholic beverages or illicit drugs, and/or possession of dangerous weapons

Drug and Alcohol Testing: In order to assure a drug-free work environment, the District prohibits the use, sale, transfer, being under the influence and/or reporting to work after using or ingesting illicit drugs in accordance with department policies. Successful passage of drug testing will be condition for employment and continued employment.

Sexual Harassment: Sexual Harassment is defined as any unwelcome sexual advances, requests for sexual favors, or other verbal or physical contact of a sexual nature when (1) submission of such conduct is made a job requirement or causes changes in working terms or conditions, and/or (2) it has the effect and purpose of unreasonably interfering with work performance or creating an intimidating, hostile or offensive workplace. Sexual harassment **will not** be tolerated and will be grounds for immediate termination.

Acquiring and maintaining, in a current status, an Arizona Driver’s License and Arizona Emergency Medical Technician Certification are conditions of employment. Failure to maintain both the driver’s license and EMT certification will result in termination of employment. [Administrative personnel excluded.]

The District has no specific residency requirement, but it is expected that volunteers live within or in close proximity to the District area of jurisdiction so as to be available to respond, in a reasonable amount of time, to call-back for incidents. [Administrative personnel excluded.]

In further consideration for my services, I understand and agree that there are other forms, statements and provisions that have to be completed and agreed to, and these forms, statements and provisions are part of this application and will be included within my service records.

I have read this Statement of Understanding and fully understand and agree with it. By signing this application, I certify under penalty of law that the information provided anywhere in this application is true, correct, and complete to the best of my knowledge and belief.

Signature

Date