

NORTHSHORE FIRE PROTECTION DISTRICT



EMPLOYMENT APPLICATION

- Full Time
- Part Time
- Extra Help

APPLICANT NAME: _____

APPLICANT Phone Number: _____

Northshore Fire Protection District

Employment Application

Applicant Information

Full Name: _____ DOB: _____
Last First M.I.

Address: _____
Physical Address City/State/Zip

_____ *Mailing Address City/State/Zip*

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Do you have a valid Drivers License? YES NO
Driver's License No. _____ Expiration: _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for Northshore Fire before? YES NO If yes, when? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Northshore Fire Protection District

Employment Application

References (Continued)

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____

Job Title: _____

Job Duties: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

If NO please explain: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Job Duties: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

If NO please explain: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Job Duties: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

If NO please explain: _____

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Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

I hereby give my express written consent to do any required checks on the following to obtain information relating to the position in which I have applied:

- *My License, License status, and pending violations*
- *My Insurance, to verify that I have vehicular insurance*
- *To check previous employment*
- *To do any background checks as required*
 - ***Please note that some classifications will require a pre-employment physical***

Signature: _____ Date: _____

PLEASE ATTACH:

- A COPY OF YOUR CURRENT DRIVER'S LICENSE
- COPIES OF ANY FIRE DEPARTMENT CERTIFICATES
- COPIES OF ANY COLLEGE DEGREE
- RESUME

