



APPLICATION FOR EMPLOYMENT

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

NOTICE: FD is a drug free workplace—All applicants will be tested prior to hire.

NAME _____ SOCIAL SECURITY # _____
LAST FIRST MIDDLE

ADDRESS _____
STREET BLDG/APT#

CITY STATE ZIP CODE

TELEPHONE : _____ MOBILE/BEEPER/OTHER : _____

EMAIL ADDRESS: _____

POSITION(S) APPLIED FOR: _____ DATE OF APPLICATION: _____

REFERRAL SOURCES (PLEASE CHECK THE APPROPRIATE CATEGORY AND NAME THE SOURCE)

<input type="checkbox"/> Walk-in		<input type="checkbox"/> School	
<input type="checkbox"/> Employee		<input type="checkbox"/> Job Fair	
<input type="checkbox"/> Advertisement		<input type="checkbox"/> Employment Agency	
<input type="checkbox"/> Indeed		<input type="checkbox"/> Government	
<input type="checkbox"/> Craigslist		<input type="checkbox"/> Sign	

If necessary, best time to call you is? _____

May we contact you at work? ☐ Yes ☐ No

If yes, work number and best time to call: _____

Are you under the age of 18? ☐ Yes ☐ No

Have you applied previously to FD? ☐ Yes ☐ No
Please list the approximate date: _____

Have you ever been employed by FD? ☐ Yes ☐ No
Please list the approximate date: _____

Are you legally eligible for employment in the U.S.A.? ☐ Yes ☐ No

Date available for work? _____

What is your desired hourly rate of pay? \$ _____

Type of employment desired?
☐ FT ☐ PT ☐ Seasonal ☐ Temporary

Will you relocate if the job requires it? ☐ Yes ☐ No

What states are you willing to relocate to?

Our attendance policy may require you to work some holidays, weekends, and overtime. Are you able to meet the requirements of the job? ☐ Yes ☐ No

Do you have a valid drivers' license? ☐ Yes ☐ No
If yes, please list the State and DL # (we reserve the right to review driver's license history).

State License was issued in?	
DL #:	

Do you have a clean driving record? ☐ Yes ☐ No

Have you ever been convicted of a crime? ☐ Yes ☐ No
Answering "yes" to this question **does not constitute** an automatic bar to employment. Factors such as a date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

AN EQUAL OPPORTUNITY EMPLOYER

Employment History

Starting with your most recent employer, provide the following information

Employer	Dates of employment (from/to)
Street Address City State	Telephone #
Starting job title/final job title	
Immediate supervisor and title (for most recent position held)	Contact # of Supervisor
Why did you leave?	Compensation (Final) <input type="checkbox"/> Hourly \$ _____ <input type="checkbox"/> Salary \$ _____
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Explain (if no or later)
Summarize the type of work performed and job responsibilities	
What did you like the most about your position?	
What were the things you liked least about the position?	

Employer	Dates of employment (from/to)
Street Address City State	Telephone #
Starting job title/final job title	
Immediate supervisor and title (for most recent position held)	Contact # of Supervisor
Why did you leave?	Compensation (Final) <input type="checkbox"/> Hourly \$ _____ <input type="checkbox"/> Salary \$ _____
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Explain (if no or later)
Summarize the type of work performed and job responsibilities	
What did you like the most about your position?	
What were the things you liked least about the position?	

Employment History-(continued)

Employer	Dates of employment (from/to)
Street Address	City State Telephone #
Starting job title/final job title	
Immediate supervisor and title (for most recent position held)	Contact # of Supervisor
Why did you leave?	Compensation (Final) <input type="checkbox"/> Hourly \$ _____ <input type="checkbox"/> Salary \$ _____
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Explain (if no or later)
Summarize the type of work performed and job responsibilities	
What did you like the most about your position?	
What were the things you liked least about the position?	

Employer	Dates of employment (from/to)	
Street Address	City	State
Telephone #		
Starting job title/final job title		
Immediate supervisor and title (for most recent position held)		Contact # of Supervisor
Why did you leave?		Compensation (Final) <input type="checkbox"/> Hourly \$ _____ <input type="checkbox"/> Salary \$ _____
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Explain (if no or later)
Summarize the type of work performed and job responsibilities		
What did you like the most about your position?		
What were the things you liked least about the position?		

Employment History- (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability:

If not addressed on previous page, have you ever been fired or asked to resign from a job? ☐ Yes ☐ No

If yes, please explain: _____

Skills and Qualifications

Summarize any special training; skills, licenses and/or certificates may assist you in performing the position for which you are applying.

Computer Skills (check appropriate boxes. Include software titles and years of experience)

- | | |
|--|---|
| <input type="checkbox"/> Word Processing _____ Years _____ | <input type="checkbox"/> Internet _____ Years _____ |
| <input type="checkbox"/> Spreadsheet _____ Years _____ | <input type="checkbox"/> Other _____ Years _____ |
| <input type="checkbox"/> Presentation _____ Years _____ | <input type="checkbox"/> Other _____ Years _____ |
| <input type="checkbox"/> Email _____ Years _____ | <input type="checkbox"/> Other _____ Years _____ |

Educational Background

Starting with your most recent school attended, provide the following information.

Name of School Attended	Address	Dates Attended	Graduated	Type of Degree/Certificate
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

References

List name and telephone number of three business/work references that are not related to you and are not previous supervisors. If not applicable, list three school or personal references that are not related to you.

Name	Title	Relationship to you	Telephone	Numbers of Years Known

Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, and mental or physical disabilities. Veteran/reserve National Guard or any other similarly protected status.

Organization	Offices Held

List special accomplishments, publications, awards, etc.

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, and mental or physical disabilities. Veteran/reserve National Guard or any other similarly protected status.

In your current or a prior job, have you ever written instructions or directions to be followed by employees or customers?

☐ Yes ☐ No ☐ Not Applicable

If yes, please explain: _____

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and education institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment processes and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I further understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

I certify that I have read, fully understand and accept all terms of the foregoing applicant Statement.

Signature of Applicant _____ Date _____