

# AMADOR FIRE PROTECTION DISTRICT

810 Court Street, Jackson, CA 95642-9534 Ph. (209) 223-6391

Date Stamp

## APPLICATION FOR EMPLOYMENT

**This application must be submitted to the District Office at 810 Court Street Jackson, CA 95642.**

A separate application must be submitted for each position for which you apply. This application must be typed or printed in ink. Acceptability for any interview or examination is based on the information in this application. An application completed with insufficient detail or in pencil will be rejected. The application and attachments once submitted cannot be returned. It is your responsibility to notify the District Office of any change of address. Resumes may be attached but will not be accepted in lieu of any portion of this application. Job descriptions are available at the District Office or on our website, [www.amadorfire.org](http://www.amadorfire.org)

**POSITION YOU ARE APPLYING FOR:** \_\_\_\_\_ **Available Start Date:** \_\_\_\_\_

**TYPE OF EMPLOYMENT:** Full Time      Part-Time      Extra-Help      Volunteer      Intern Program

Name: \_\_\_\_\_  
Last                                      First                                      Middle                                      Social Security Number

Home Address: \_\_\_\_\_  
Street No.                                      City                                      State                                      Zip

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_  
Home                                      Mobile                                      E-Mail

Are you 18 years of age or older? ..... **Yes**   **No**

Can you, after offer of employment, submit verification of the legal right to work in the United States? ..... **Yes**   **No**

Drivers License No: \_\_\_\_\_ Class: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### READ FULLY AND RESPOND TO THE FOLLOWING QUESTIONS:

1. Have you ever been convicted of a crime? ..... **Yes**   **No**

If yes please list below, but **exclude** the following information from your response: (1) Any pretrial or post-trial referral to diversion programs; (2) any convictions for which the records have been judicially ordered sealed, expunged or statutorily eradicated, such as juvenile records; (3) any misdemeanor conviction for which probation has been successfully completed or otherwise discharged and the case has been dismissed; (4) any marijuana possession convictions occurring more than two years ago and concerning a quantity of 28.5 grams of marijuana or less; and (5) any traffic citations.

2. Are you currently out on bail or on your own recognizance pending trial on criminal charges? ..... **Yes**   **No**

3. Have you ever been discharged from a position, or terminated during a probationary period for unsatisfactory service, or have you ever resigned upon request to avoid discharge? ..... **Yes**   **No**

If yes please give name and address of employer, date of discharge or forced resignation, and the reason in space provided below.

If you answered "Yes" to questions 1, 2, or 3 above please explain

### FOR DISTRICT USE ONLY

Application Reviewed By \_\_\_\_\_ Date \_\_\_\_\_

Application Accepted? Yes  No  If application is rejected, for what reason? Incomplete  Late  Minimum Qualifications not met

Other: \_\_\_\_\_

Please read the Minimum Qualifications described in the job announcement carefully before completing the sections below. The information you provide will allow us to determine whether you meet the minimum qualifications. Resumes CANNOT be substituted for completing the sections below in their entirety.

**EDUCATION**

Do you possess a High School Diploma or G.E.D.? Yes      No

Colleges or Universities Attended:

School Name and Location	Dates Attended	Field of Study	Units	Type/Date of Degree
--------------------------	----------------	----------------	-------	---------------------

Licenses or Certificates pertinent to the position for which you are applying:

Certificate or License	Date Received	Expiration Date (if applicable)
------------------------	---------------	---------------------------------

**EMPLOYMENT HISTORY**

List experience in the last 10 years, starting with current or most recent. (if needed, list additional on an attached sheet).

**Employer:** \_\_\_\_\_ **Dates of Employment:** \_\_\_\_\_ to \_\_\_\_\_

**Business Address:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
Street City State Zip

**Job Title:** \_\_\_\_\_ **Duties:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Dates of Employment:** \_\_\_\_\_ to \_\_\_\_\_

**Business Address:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
Street City State Zip

**Job Title:** \_\_\_\_\_ **Duties:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Dates of Employment:** \_\_\_\_\_ to \_\_\_\_\_

**Business Address:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_  
Street City State Zip

**Job Title:** \_\_\_\_\_ **Duties:** \_\_\_\_\_

Have you ever served as a volunteer firefighter? **Yes** **No** If yes list below:

Fire Department \_\_\_\_\_ Position \_\_\_\_\_ Dates: From \_\_\_\_\_ to \_\_\_\_\_

Fire Department \_\_\_\_\_ Position \_\_\_\_\_ Dates: From \_\_\_\_\_ to \_\_\_\_\_

Fire Department \_\_\_\_\_ Position \_\_\_\_\_ Dates: From \_\_\_\_\_ to \_\_\_\_\_

**REFERENCES** (Do not list relatives)

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address (Mailing): \_\_\_\_\_  
Street City State Zip

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address (Mailing): \_\_\_\_\_  
Street City State Zip

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address (Mailing): \_\_\_\_\_  
Street City State Zip

**CERTIFICATION**

Recheck the application to be sure it is complete and read the following carefully before signing.

I hereby authorize representatives of the District to contact organizations (including employers and schools) and individuals listed for the purpose of establishing or verifying my qualifications, work history, and work habits, such as attendance in connection with this application for District employment. I understand and acknowledge that such information will be used confidentially and for the purposes of employment decisions only. It will not become part of my personnel records once I am employed and will not be available for review by me. I also authorize the individuals or organizations contacted to release the above information to the District.

I hereby certify that all statements made in this application are true and I agree that any misstatement or omission of material facts herein may cause forfeiture on my part of any employment with the Amador Fire Protection District. I further agree to a criminal background check including LiveScan fingerprinting, to submit to a complete medical examination including drug screening, and upon employment, to furnish such proof of age as may be required.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ATTACH TO THIS APPLICATION:**

- **Copies of all certifications and licenses pertinent to this application for employment, such as first aid, first responder, EMT, paramedic, CPR.**
- **A DMV Printout from within 30 days must be attached.**
- **Resume of experience, if requested on job announcement.**

**AMADOR FIRE PROTECTION DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER**