

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.**
- **Resume of experience, if requested on job announcement.**

AMADOR FIRE PROTECTION DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER