

Tenmile Rural Fire District

Volunteer Emergency Responder Application 158 Reston Road Tenmile, OR 97481 (541) 679-1882



The Tenmile Fire District is an equal opportunity employer and does not unlawfully discriminate on the basis of race, sex, age, color, religion, natural origin, marital status, veteran status, disability status, or any other basis prohibited by federal, state, or local law.

## PERSONAL INFORMATION

Applicant:					
	Last	First	MI	DOB	Home Phone #
Mailing Addre	ess:				
		Street, City, State & Zip		Cell #	Social Security No.
Physical Addr	ress:				Yes No Are you 18 Years or older?
		Street, City, Sate & Zip		l	Are you 18 Years or older?
Email:				<u></u>	
					ODL No. /State /Issue & Exp Date
<b>Position Apply</b>	ying:	·	Available Start	Date:	_ Todays Date:

Are you able, at the time of employment, to submit verification of your legal right to work in the U.S.?  $\Box$  Yes  $\Box$  No

Would you take a physical examination if required for the job which you are applying?  $\Box$  Yes  $\Box$  No Have you ever applied for Tenmile Rural Fire District before?  $\Box$  Yes  $\Box$  No

Are you willing to relocate within 15 minutes of the fire district for this position?  $\Box$  Yes  $\Box$  No

### TRAINING & BACKGROUND

High School	Location	Did you graduate	If no, grade completed or GED

Colleges Attended	Location	Major/Minor	Degree Obtained / None

Job related Licenses/Certs	Date Issued	Expiration Date	Licensing or Cert Agency

## SPECIAL SKILLS, QUALIFICATION & CONSIDERATION

(Summarize special skills and qualifications, volunteer activities, community involvement, employment, hobbies, military, or other related activities related to the job you are seeking)

#### FIRE/EMS EXPERIENCE

Have you ever belonged to a fire or EMS agency? Yes  $\Box$  No  $\Box$  If yes, please give information below:

Department Name	Phone	Recruiter / Contact Name

Rank/Title/Certification Level

DPSST#

EMS#

\_\_\_\_

 EMS State:
 \_\_\_\_\_\_
 Issue Date:
 Expiration Date:

Please indicate 'X' any of the following certifications you have obtained:

First Aid and CPR	Wildland FF 1 or 2	Pumper Operator	NFPA Instructor	
Entry FF	Apparatus Driver	Extrication Technician	FLG/Fire Officer	
NFPA FF 1 or 2	EMR	EMT	Paramedic	

#### EMPLOYMENT HISTORY

Provide the following information of your past and current employers starting with the most recent. (use additional sheets if necessary).

#### **EMPLOYER**

Employed by

DATES EMPLOYEI	D
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From / To

Phone

Type of Work: Job Responsibilities

Immediate Supervisor and Title

Reason for Leaving

**EMPLOYER** 

Employed by

Mailing Address: Street or PO, City, State & Zip

Mailing Address: Street or PO, City, State & Zip

Starting Job Title / Ending Job Title

Starting Job Title / Ending Job Title

DATES EMPLOYED

Type of Work: Job Responsibilities

May We Contact for Reference  $\Box$  Yes  $\Box$  No  $\Box$  Later

From / To

Phone

Immediate Supervisor and Title

Reason for Leaving

May We Contact for Reference  $\Box$  Yes  $\Box$  No  $\Box$  Later

#### PERSONAL REFERENCES

List name, address, and phone number of three business/work references who are not related to you that we may contact for a reference.

Name	Address/City	Phone
Name	Address/City	Phone
Name	Address/City	Phone

Relation

Phone

ADDITIONAL INFO, SPECIAL ACCOMPLISHMENTS, PUBLICATIONS, AWARDS, ETC. (EXLUDE MEMBERSHIP THAT WOULD REVEAL RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, CITIZENSHIP, AGE, MENTAL OR PHYSICAL DISABILITIES, VETERAN/RESERVE NATIONAL GUARD OR ANY OTHER SIMILARLY PROTECTED STATUS).

#### LIST ANY ADDITIONAL INFORMATION YOU WOULD LIKE US TO CONSIDER.

The employing agency may require a pre-employment physical with a physician retained by the agency. Such physical will include a drug-screening test. My signature below serves as authorization to the physician to release all information relative to the pre- employment physical and drug testing results. If such results indicate an inability to perform the job applied for or drug use, I understand my application may be rejected or my employment with the agency terminated.

Initials \_\_\_\_\_

I understand that if my employment is terminated by any of the Districts for dishonesty, breach of trust, or any criminal act(s) the authorities may be notified, and I may be criminally prosecuted.

Initials \_\_\_\_\_

I understand that this application does not, by itself, create a contract of employment.

Initials \_\_\_\_\_

I understand and agree that, if hired, MY EMPLOYMENT IS TEMPORAY, FOR NO DEFINITE PERIOD OF TIME, and may, regardless of the date of payment of my wages or salary, BE TERMINATED AT ANY TIME, subject to Districts policies.

Initials \_\_\_\_\_

I understand that NO PERSON IS AUTHORIZED TO CHANGE ANY OF THE TERMS MENTIONED IN THIS EMPLOYMENT APPLICATION FORM.

Initials \_\_\_\_\_

# **PLEASE NOTE:** *Incomplete applications will not be processed; information on resumes will not be accepted in place of a full complete application.*

The Tenmile Fire District assures fair treatment of applicants and employees in all aspects of personnel administration without regard to political affiliation, race, color, national origin, age, sex, religious affiliation, creed, marital status, disability, veteran status, sexual orientation, or any other protected class under State and/or Federal law and with proper regard for their privacy and constitutional rights as citizens.

#### **Applicant Statement:**

I certify that all information I have provided in order to apply and secure work with the Tenmile Fire District is true, complete and accurate. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to cancel further consideration of this application or immediately discharge me from the Tenmile Fire District's service, whenever it is discovered.

I expressly authorize, without reservation, the Tenmile Fire District, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities end educational 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 Tenmile Fire District, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the Tenmile Fire District does not unlawfully discriminate in employment and no questions on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited be applicable local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and 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 of definite duration. I understand that no supervisor or representative of the Tenmile Fire District 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 Chief and Board of Directors. 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.

#### 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. I further acknowledge that no offer or promise of employment as a volunteer or employee has been made to me at this time.

Signature

Date

Return application and résumé to: Tenmile Rural Fire District

# P.O. Box 77 Tenmile OR 97481

## Applications must be returned in person or by mail; NO FAXES ACCEPTED

## NO APPLICATIONS WILL BE ACCEPTED AFTER DECEMBER 19TH AT 1700 HOURS. IF MAILED, MUST BE POSTMARKED BY DECEMBER 15TH

"The Tenmile Fire District is a DRUG FREE workplace"

Administrative	Use Only
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Person Contacted	Results
Comments:	