

Sherwood Forest Estates Fire Department

NOTE - Resumes will not be accepted in place of this completed application

1. Position for which you are appl	ying - position title	
2. Name - Last	First	Middle
3. Other names used		
4. Driver's License#	Date of birth	Social Security
5. Present address		Apt
City	State	Zip
6. Previous address		Apt
City	State	Zip
7. Phone home ()	Work ()	Cel ()
8. Are you a US citizen? YES/NO entry permit? YES/NO	If NO, are you legally e	eligible to be employed under a visa or
9. In what language(s) are you flu	ent?	-
10. Have you ever been convicted	d of a crime? YES/NO If Yes e	explain the nature of the offense, date,
location, agency & disposition (at	tach separate sheet if necess	ary):
Have you prior employment with	this fire district? YES/NO/DA	TE/POSITION
Are you a US Military Veteran? Y	ES/NO Can you provide a D	D-214 to verify? YES/NO
Have you ever been denied a cert	cification by the Arizona Depa	rtment of Health Services? YES/NO
Do you know of any reason you w Medical Technician? (answer only		tification as an Arizona Emergency YES/NO
List professional society members	shins ioh related licenses reg	vistrations certificates with their numbers

and expiration dates (attach separate sheet if necessary):

Provide any additional comments or information that would be of assistance in considering you for this position (attach resume or separate sheet if necessary):

Include paid or verifiable non-paid experience including unemployment, self-employment, school and military service. If you had more than one position with the same employer, list each position separately (attach resume or separate sheet if necessary):

Employer's name / Typ	e of business:			
Complete Address:				
Phone Number:				
Reason for leaving:				
From (mo/yr):	To (mo/yr):			
Supervisors name:				
Your Job title:				
Description of duties:				
Hours worked:				
Explain any breaks in th	ne time frame bet	ween employment:		
Based on your opinion regarding: Attendance:	•	• •	•	
Conscientiousness:		_Skill level:		
List all schools attended	d, list most recent	: first (attach resume	or separate sheet if ne	ecessary):
High school graduate/6	GED? If not what	was the highest year	you completed? YES/	NO/YR
School / address:				
Dates attended (mo/yr	- mo/yr):			
Semester hours earned	i :			
Degree or diploma and	date received:			
Major area of study:				
Do you have a reason t position applied for? YE	-	u will not be able to p	erform any essential jo	ob function for the

Have you received/reviewed a copy of the job description you are applying for? YES/NO

Affirmation & Waiver

I authorize investigation of all information contained herein and specifically authorize the employers and references to give you any and all information concerning me and by doing so, release all persons, schools, companies, corporations, credit bureaus, government agencies and medical personnel from any liability for any damage that may result from furnishing same to you.

I further agree to submit to alcohol and/or drug screening tests, if requested of me, at any time prior to, or during my employment, including but not limited to urinalysis test, polygraph test, blood test, hair sampling, with or without reasonable suspicion.

In consideration for my employment, I agree to conform to the fire district policies, practices, rules/regulations and guidelines, which may be changed from time to time. I understand that my employment is at will, and the terms and benefits provided to me is not intended to and does not constitute any contractual relationship, is for no definite period of time and is terminable by myself or the fire district with or without notice or cause. No oral statements or representations made either before or during employment can change or modify this non-contractual and at-will relationship.

In further consideration for my employment, I understand and agree that there are other forms, statements and provisions that may have to be completed and agreed to, and those forms, statements and provisions are part of this application and will be included within my employment records.

I consent to a criminal background check to be performed, and authorize all law enforcement and reporting agencies to disclose to the fire district all aspects of my criminal history, of whatever nature.

By signing this application, I certify that I have read and understand the contents and limitations set forth above, and that the information provided anywhere in this application is true, correct, and complete to the best of my knowledge and belief. I understand that providing false or misleading information shall be grounds for termination or disqualification.

Signature	Date

SFEFD 1-25-2002