|  |
| --- |
| South Sherman Fire & Rescue |



|  |
| --- |
| 109 SW 2nd ST. P.O. Box 116Grass Valley, Oregon 97029Phone: (541) 333-2525Fax: (541) 333.2276admin@southshermanfire.com |

|  |
| --- |
| Application |

|  |  |
| --- | --- |
| Firefighter: ☐ Medic: ☐  | Part Time: ☐ Volunteer:☐ Both:☐ |

Position applying for

|  |
| --- |
|  |

Date of Application

**Name**

|  |  |  |
| --- | --- | --- |
|  |  |  |

Last First Middle

**Address**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

Street City State Zip

**Telephone E-Mail Address**

|  |  |
| --- | --- |
|  |  |

|  |
| --- |
|  |

**Date of Birth**

**Drivers License Number State Class**

|  |  |  |
| --- | --- | --- |
|  |  |  |

**Traffic Convictions past Five Years**

**Date Nature of Citation Outcome**

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**List more on separate sheet if necessary.**

**Vehicle Crashes Past Five Years**

**Date Nature of Crash Injury**

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**List more on separate sheet if necessary.**

Have you ever been denied a Driver’s License in ANY State? Explain

|  |
| --- |
|  |

Has your Driver’s License EVER been Suspended or Revoked in ANY State? Explain

|  |
| --- |
|  |

Have you EVER been convicted of a crime including a Traffic Crime? Explain

|  |
| --- |
|  |

Do you have any prior Fire or Medical Training, including Certificates? Please list.

|  |
| --- |
|  |

Do you have any experience in the operation of ANY Heavy Equipment? Please list.

|  |
| --- |
|  |

Do you have any experience with computers? Please list programs.

|  |
| --- |
|  |

Please list any other information you would like the District to consider.

|  |
| --- |
|  |

List any medical conditions you have that may affect your ability to perform required duties?

|  |
| --- |
|  |

**Employment Record and History for the past Five Years**

Beginning with present or most recent job, list your work experience for the past five years.

Add additional sheets if necessary.

|  |  |  |
| --- | --- | --- |
| Company Name and Address

|  |
| --- |
|  |

  | Supervisor’s Name  |
| Reason for leaving:  |
| Start *(mm/yyyy)* | End *(mm/yyyy)* |
| Position Held:  |

|  |  |  |
| --- | --- | --- |
| Company Name and Address

|  |
| --- |
|  |

  | Supervisor’s Name  |
| Reason for leaving:  |
| Start *(mm/yyyy)* | End *(mm/yyyy)* |
| Position Held:  |

|  |  |  |
| --- | --- | --- |
| Company Name and Address

|  |
| --- |
|  |

  | Supervisor’s Name  |
| Reason for leaving:  |
| Start *(mm/yyyy)* | End *(mm/yyyy)* |
| Position Held:  |

|  |  |  |
| --- | --- | --- |
| Company Name and Address

|  |
| --- |
|  |

  | Supervisor’s Name  |
| Reason for leaving:  |
| Start *(mm/yyyy)* | End *(mm/yyyy)* |
| Position Held:  |

**References**

Please list below Five References who are not related to you, and you have not worked for

|  |  |  |
| --- | --- | --- |
| Last | First | Middle |
| Street | City | State | Zip |
| Relationship | Years Known | Phone Number |

|  |  |  |
| --- | --- | --- |
| Last | First | Middle |
| Street | City | State | Zip |
| Relationship | Years Known | Phone Number |

|  |  |  |
| --- | --- | --- |
| Last | First | Middle |
| Street | City | State | Zip |
| Relationship | Years Known | Phone Number |

|  |  |  |
| --- | --- | --- |
| Last | First | Middle |
| Street | City | State | Zip |
| Relationship | Years Known | Phone Number |

|  |  |  |
| --- | --- | --- |
| Last | First | Middle |
| Street | City | State | Zip |
| Relationship | Years Known | Phone Number |

**Please attach with this application**

* Current DMV Printout
* Copy of Drivers’ License
* Copy of Certifications
* Any supplemental pages necessary to further explain

I certify that all statements in this application are true. I understand that misrepresentation or omission of facts is cause for dismissal. Further, it is understood and agreed upon that my involvement with the South Sherman Rural Fire Protection District as a volunteer/part-time employee is for no definite period of time and may be terminated at any time, with or without cause. I hereby grant South Sherman Rural Fire Protection District or any AGENT acting on behalf of the South Sherman Rural Fire Protection District permission for a complete background investigation of applicant, including, but not limited to Driving Record, Criminal Record, Character References and past employment. South Sherman Rural Fire Protection District is a Drug and Alcohol free workplace. A pre-employment/volunteer drug test may be given. All employees, volunteers, agents of the South Sherman Rural Fire Protection District may be subject to random drug and/or alcohol testing with, or without, prior notice or reason. Refusal to take a requested drug and/or alcohol test can result in termination from the South Sherman Rural Fire Protection District.

Applicant Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applications can be mailed, faxed, e-mailed, or handed in.**

---------------For Department Use Only---------------

Start Date: \_\_\_/\_\_\_\_/20\_\_\_

Applicant Affiliation (mark all that apply) Full Time\_\_\_\_\_\_Part Time\_\_\_\_\_Volunteer\_\_\_\_\_

Background Investigation Conducted By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_