

# TOWN OF FARMINGTON

## FIRE RESCUE APPLICATION FOR EMPLOYMENT

Applicants are considered for all positions without regard to race, color, creed, national origin, religion, age, gender, disability, marital or veteran status, or any other legally protected status.

**THE TOWN OF FARMINGTON IS AN EQUAL OPPORTUNITY EMPLOYER**

PLEASE PRINT CLEARLY

<b>Date:</b>	<b>Position(s) Applied For:</b>	<b>Social Security #</b>
<b>Name: Last</b>	<b>First Middle</b>	<b>Home Telephone:</b>
<b>Mailing Address:</b>		<b>Work Telephone:</b> E-Mail Address:

<p>Are you currently employed? <b>YES NO</b></p> <p>Are you currently on "lay-off" status and subject to recall? <b>YES NO</b></p> <p>May we contact you at your current Place of Employment? <b>YES NO</b></p> <p>Best time to contact you: Home: _____ A.M./P.M. Work: _____ A.M./P.M.</p> <p>May we contact your present employer? <b>YES NO</b></p> <p>Have you ever filed an application with the Town before? If Yes, give date: _____ <b>YES NO</b></p> <p>Have you ever been employed by the Town before? <b>YES NO</b> If Yes, give dates of employment and position held. _____ _____</p> <p>Do any members of your immediate family work for the Town? If Yes, give names and relationship: <b>YES NO</b> _____ _____</p>	<p>Can you provide evidence that you are at least 18 years of age. <b>YES NO</b></p> <p>Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status will be required upon employment.) <b>YES NO</b></p> <p>Have you been convicted of any crime other than a minor traffic violation? If Yes, please give date and describe offense: <b>YES NO</b> _____ _____</p> <p>Date available for work: _____</p> <p>Driver's License # _____ Has your driver's license ever been suspended or revoked? <b>YES NO</b></p> <p>Have you ever served on a Fire Dept. _____ Police Dept. _____ Or Ambulance _____ If you have please give details of dates of service, location, duties and reason for leaving on a separate sheet of paper.</p>
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### EDUCATION

School	Name & Address	Last Year Completed	Degree	Major
High School				
Trade, Business Or College				
Other (include training, Workshops, etc.)				

### SKILLS/TRAINING

What office machines can you operate? \_\_\_\_\_  
 \_\_\_\_\_

Do you have any computer experience? **YES NO** If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_

Other Skills? \_\_\_\_\_  
 \_\_\_\_\_

What heavy machinery can you operate? \_\_\_\_\_  
 \_\_\_\_\_

### EMPLOYMENT HISTORY (Starting with current or most recent position)

Employer Name:  Supervisor:	Address:  Telephone:	Reason For Leaving:	Dates Employed: From: ___/___/___ To: ___/___/___  Position Held:
Employer Name:  Supervisor:	Address:  Telephone:	Reason For Leaving:	Dates Employed: From: ___/___/___ To: ___/___/___  Position Held:
Employer Name:  Supervisor:	Address:  Telephone:	Reason For Leaving:	Dates Employed: From: ___/___/___ To: ___/___/___  Position Held:
Employer Name:  Supervisor:	Address:  Telephone:	Reason For Leaving:	Dates Employed: From: ___/___/___ To: ___/___/___  Position Held:
Employer Name:  Supervisor:	Address:  Telephone:	Reason For Leaving:	Dates Employed: From: ___/___/___ To: ___/___/___  Position Held:

### REFERENCES (Please list 3)

Name:	Address:	Telephone:	Years Acquainted:
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Name:	Address:	Telephone:	Years Acquainted:

### VERIFICATION & RELEASE

I certify that the answers I have provided in this application are true and complete to the best of my knowledge. I authorize investigation of all statements made herein, including contacting any reference, prior employer, school or military service and I authorize the release of any information in the possession or knowledge of such entities. I understand that any false or misleading information given in this application or in interviews may result in my termination.

Signature of Applicant: _____	Date of Application: _____
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## INVESTIGATION AUTHORIZATION

I, \_\_\_\_\_, understand that in order to assess my qualifications for a position with the Town of Farmington, a full background investigation is necessary. I, therefore, authorize the Town of Farmington, or its agents to arrange for or to conduct such an investigation which will involve: verification of information provided by me to the Town, financial management check, contacting persons for character references, contacting employers for performance information, verifying educational attainment, a criminal records check, Military Service records and driver's license check.

Successful candidates will be provided a conditional offer of employment which will be upgraded to final offer of employment if the applicant submits( within 60 days) written evidence from qualified physician that the applicant is in good physical health and can fulfill the job requirements provided reasonable accommodation are made by the town and the applicant successfully preforms the physical fitness requirements. The physical will be at the town's expense. The town reserves the right to obtain a second opinion at its own expense, prior to issuing a final offer of employment.

I hereby authorize all my present and previous employers, or references to furnish information concerning my personal character, habits or employment performance. I also authorize schools that I have attended to provide verification of educational attainment.

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Applicant's Signature

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Date

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Date of Birth

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Social Security Number