

Chippewa Fire District

Application for Employment

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You are required to attach a résumé and all questions must be answered.

PERSONAL DATA			
Name (last, first, middle)			
Street Address and/or Mailing Address		City	State Zip
Home Telephone Number	Business Telephone Number	Cellular Telephone Number	
Date you can start work	Salary Desired	Do you have a High School Diploma or GED? Yes <input type="checkbox"/> No <input type="checkbox"/>	
POSITION INFORMATION			
Are you authorized to work in the U.S. on an unrestricted basis?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) If yes, explain:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Can you perform these essential functions of the job with or without reasonable accommodation? Yes <input type="checkbox"/> No <input type="checkbox"/>			
QUALIFICATIONS			
Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training.			
	School Name	Degree	Address/City/State
School			
School			
Other			
SPECIAL SKILLS			
List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc.)			
REFERENCES			
Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.			
Name	Address/City/State	Phone	Relationship
WORK HISTORY			
Start with your present or most recent employment and work back. Use separate sheet if necessary. (INCLUDE PAID AND UNPAID POSITIONS)			
Job Title #1	Start Date (mo/day/yr)	End Date (mo/day/yr)	
Company Name	Supervisor's Name	Phone Number	
City	State	Zip	
Duties:			
Reason for Leaving	Starting Salary	Ending Salary	

Job Title #2	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

Job Title #3	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

Job Title #4	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Chippewa Fire District to make an investigation of any of the facts set forth in this application, conduct a background check, and release the Chippewa Fire District from any liability. The Chippewa Fire District may contact any listed references on this application. I acknowledge and understand that there will be an eighteen (18) month probation for this position.

Applicant Signature

Date

Chippewa Fire District

Questionnaire

The check-off questions below provide a means of quickly reviewing your qualifications. Please circle "YES" or "NO" for each question.

- | | | |
|---|-----|----|
| 1. Are you able to work in United States? | Yes | No |
| 2. Have you ever been convicted of a felony? | Yes | No |
| 3. Do you have a valid driver's license? | Yes | No |
| 4. Have you ever had auto insurance withdrawn, cancelled, revoked, or refused? | Yes | No |
| 5. Have you ever been refused a driver's license? | Yes | No |
| 6. Has your driver's license ever been revoked, suspended or cancelled? | Yes | No |
| 7. Have you ever been convicted of any violation(s) of local or county ordinances, State or Federal laws (excluding traffic)? | Yes | No |
| 8. Have you every participated in any deferred prosecution or First Offender's Program? | Yes | No |
| 9. Have you ever been on court ordered probation? | Yes | No |
| 10. Have you ever been terminated from a job? | Yes | No |
| 11. Have you ever been suspended from a job? | Yes | No |
| 12. Have you ever been charged (criminally or not) of a domestic abuse related violation? | Yes | No |
| 13. Have you ever been charged (work place related or otherwise) with a Sexual Harassment or sexual related violation? | Yes | No |

If you wish to provide additional information for any of the questions listed above, you may do so by attaching additional information to this page. Your answers must be neatly printed.

ALL APPLICANTS MUST MAKE THIS CERTIFICATION:

I have read the job specifications and in my opinion, I meet the minimum requirements. I have read and made a complete answer to each question. I certify that my answers in each instance are true and correct, containing no misrepresentations, omissions or falsifications, and are complete. I agree that any misstatements or omissions of material fact will cause forfeiture on my part of all rights to any employment in the Chippewa Fire District service.

Signature

Date

Chippewa Fire District
AUTHORIZATION FOR BACKGROUND CHECK

Please read and sign this form in the space provided below. The Chippewa Fire District is under WI SS Chapter 50, 51, and 146 and as an EMS Responder Agency, we are required to complete a background check on all applications. Your written authorization is necessary for completion of the application process.

I, _____, hereby authorize Chippewa Fire District to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that Chippewa Fire District may utilize an outside firm or firms to assist with checking such information, and I specifically authorize such an investigation by information services and outside entities of the Chippewa Fire District's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

Applicant Social Security Number

Applicant Driver License and State issues in

Signature of Applicant

Date

Please return your completed application, resume, questionnaire,
and authorization for background check to:

Chippewa Fire District
13140 30th Avenue
Chippewa Falls, WI 54729-7377

or email to

chippewafiredistrict@gmail.com