

## **Employment Application**

## Cimarron Hills Fire Protection District

A Community Centered Family Department

## COMPLETE IN FULL and PRINT CLEARLY

Date of Application: _	Position App	lying For:		
Name:		Phone:	Phone	2:
Email:				
Address:		City:	State:	Zip:
Please list any former	names or aliases:			
Are you a citizen of th	e United States or are you leg	ally authorized to work in th	e U.S.?YES	NO
Do you hold a valid dr	iver's license? License N	umber:	State: Exp	oiration:
List any traffic violatio	ns within the last three years.	Please list type of violation	, date, and location:	
Are you 18 years of ac	ge or order? YES	NO		
, ,		_		
		EDUCATION ————		
High School Name a	and Location:			
	_ Course of Study:			
College, Vocation or	Technical Schools			
Name and Location:				
				GPA:
Degree/Certificate/Dip	oloma Received:			
College, Vocation or	Technical Schools			
Name and Location: _				
Major:		Yea	rs Completed:	GPA:
Degree/Certificate/Dig	oloma Received:			

		ЕМР	LOYMENT EXPERIENCE
se		time, including	paid and unpaid) in chronological order starting with the most remilitary service and any period of unemployment. Please attact a resume.
1.	Employed from:	to	Position/Title:
	Company Name:		
	Address:		
	Last Supervisor/Title:		Phone Number:
	Work Performed:		
	Reason for Leaving:		
			May we contact this employer?
<u>.</u>	Employed from:	to	Position/Title:
	Company Name:		
	Address:		
	Last Supervisor/Title:		Phone Number:
	Work Performed:		

\_\_\_\_ May we contact this employer? \_\_\_\_\_

3.	Employed from:	to	Position/Title:	
	Company Name:			
	Last Supervisor/Title:			Phone Number:
	Work Performed:			
				May we contact this employer?
4.	Employed from:	to	Position/Title	
+.				
				Phone Number:
	Work Performed:			Those Number:
	Reason for Leaving:			
				May we contact this employer?
5.	Employed from:	to	Position/Title:	
	Company Name:			
	Address:			
	Last Supervisor/Title:			Phone Number:
	Work Performed:			
	Reason for Leaving:			
				May we contact this employer?

6.	Employed from:	to	_ Position/	Title:		
	Company Name:					
	Address:					
	Last Supervisor/Title: _			Phor	e Number:	
	Work Performed:					
	Reason for Leaving:				ve contact this employ	
Do yo	you read the job desci u understand the job i ou perform the job red	requirements? _	YES	NO	nmodation? Y	ES NO
Please	: list two professional refe			<b>S S S S S S S S S S</b>	wo personal reference	s:
NAME					- <b>-</b>	
			PHON		RELATIONSHIP	
			PHON		-	
			PHON		-	

CERTIFICATIONS		
Please list (and attach a copy) of all current (position related) certifica as identified in the job posting/description must be included.		num certifications
CERTIFICATION	CERTIFICATE NUMBER	EXPIRATION
1		
2		
3		
4.		

## **Applicant's Declaration, Authorization, and Release**

My answers on this application and on any resume I provide are complete and true. I understand that the submission of any false or incomplete information in connection with my application whether on this or other documents or in interviews, will be cause for the rejection of my application or the termination of my employment at any time. I authorize the Cimarron Hills Fire Protection District and its agents to verify any information related to my application or resume. I also authorize individuals, schools, employers, and law enforcement or government officials to freely release any information concerning my background, and hereby release any and all of them from any liability for doing so. If the Cimarron Hills Fire Protection District employs me, I understand that I will be employed on an at-will basis for an indefinite period of time and that the Cimarron Hills Fire Protection District may terminate my employment at any time and for any reason.

Print Name	
Signature	
Date	

The Cimarron Hills Fire Protection District shall comply with appropriate federal and state laws and regulations prohibiting discrimination on grounds of race, color, religion, gender, national origin, age, or disability.