

Application for Firefighter Recruit

Instructions: Please complete the application in full. <u>Print legibly or type all information</u>. False or incomplete information is cause for rejection or dismissal. Employment is subject to a background check, driving record check, reference check, and residency requirements. This application, along with any attachments, becomes the property of the Deer Creek Fire Protection District.

All applicants meeting the Deer Creek Fire Protection District's minimum qualifications will be considered for employment without regard to race, religion, sex, nation origin, or age.

Personal Information

Name (Last, First, Middle)	Social Security No				
Date of Birth Oklahoma State Pension System requirements)	(must be at least 18 years of age to apply but no older than 45 years of age per)				
Present Address					
Home Telephone					
E-mail Address	2				
Do you or your spouse have any friends/relative	es who work for t	he Deer Creek Fire Protecti	on District?	Yes	No
If yes, please give their name		Relation	iship		
Have you ever been employed with the Deer Cu	reek Fire Protecti	ion District?Yes	No		
If yes, please give your reason for leaving					
Date of employment: From:		To:			
Have you previously filed an application with t	he Deer Creek Fi	re Protection District?	Yes	_No	
If yes, please give the date you previously applie	d				
Have you ever been arrested?Yes	No				
If yes, please list the reason/charges/disposition/	/date of charges_				

Education

Circle your highest level of education:		
High School 9 10 11 12	College 1 2 3 4	Graduate School 1 2 3 4
High School Name		
Location (City, State)		
Did you graduate high school?Yes	_No If no, do you have a G.E.D.?	YesNo
Please describe any courses, programs, or other a applying for		
Vocational/Technical Institute Name		
Location (City, State)		
Did you graduate?YesNo		
Please describe any courses, programs, or other a applying for		
College Name		
Location (City, State)		
Did you graduate?YesNo		
Please describe any courses, programs, or other a applying for		
		1.0L
College Name		
Location (City, State)		
Did you graduate?YesNo		
Please describe any courses, programs, or other a applying for		ne position you are

Employment History

employer. Complete all blanks that apply. Please	ave worked in the last five (5) years, starting with the most recent or current e print legibly or type. Describe all job duties performed, especially those which o which you are applying. A RESUME IS NOT A SUBSTITUTE FOR THE	
	resume may be attached as a supplement to the information given below. Failure	
	disqualification from active consideration. Use an extra page if necessary.	
Most Recent Employer	Starting Date	
Address	Ending Date	
Name of Supervisor	Position Held	
Reason for Leaving	May We Contact this Employer?YesNo	
Describe all the duties performed in this position	, especially those which demonstrate you qualification for the position to which	
you are currently applying (please be specific)		
Previous Employer	Starting Date	
Address	Ending Date	
Name of Supervisor	Position Held	
Reason for Leaving	May We Contact this Employer?YesNo	
Describe all the duties performed in this position	, especially those which demonstrate you qualification for the position to which	
you are currently applying (please be specific)		
Previous Employer	rStarting Date	
Address	Ending Date	
Name of Supervisor	Position Held	
Reason for Leaving	May We Contact this Employer? Yes No	
Describe all the duties performed in this position	, especially those which demonstrate you qualification for the position to which	

References

Instructions: Please provide three (3) professional references and one you worked directly for them.	e (1) personal references. Please do not include family references unless
Reference Name (First Last)	
Address (City, State)	
Phone Number	
E-mail Address	
Reference Type Professional Personal	
Reference Name (First Last)	
Title/Position Company	
Address (City, State)	
Phone Number	
E-mail Address	
Reference TypeProfessionalPersonal	
Reference Name (First Last)	
Title/PositionCompany	
Address (City, State)	
Phone Number	
E-mail Address	
Reference TypeProfessionalPersonal	
Reference Name (First Last)	
Title/Position Company	
Address (City, State)	
Phone Number	
E-mail Address	
Reference Type Professional Personal	

Explain, in detail, any time lapses in your employment history due to unemployment or other reasons:

Please explain, in detail, any past firefighting and/or EMS experience you have. Be sure to include relevant dates and agency names:

IMPORTANT – PLEASE READ AND SIGN

I understand that all information submitted is subject to verification. I understand and authorize the Deer Creek Fire Protection District to conduct verification and/or investigation of my criminal history, driving record, character, employment history, reputation, and any other job-related investigation as deemed necessary to determine my qualifications for employment.

I certify that all statements and answers to all questions in this application are true, complete, and correct and are made in good faith. I understand that falsification of any answers I have given will have serious consequences, including disqualification for employment and/or termination of employment.

Signature_

__ Date______