

COLORADO RIVER FIRE RESCUE APPLICATION

Prospective employees will receive consideration for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, handicap, or any other legally protected status.

Complete the entire application either typed or written in dark ink. If additional relevant information is available, please submit a resume in addition to this completed application.

Desired Position: _____

Full Name: _____

Address: _____

Telephone: (cell) _____ (home) _____

E-mail: _____

All correspondence during hiring process will be via e-mail.

Social Security Number: _____ *Date of Birth: _____

*date of birth is for background check purposes only

Are you legally eligible for employment in the United States? _____

Proof of citizenship or immigration status will be required upon employment

Have you ever been employed by Colorado River Fire Rescue, Burning Mountains Fire Protection District, or Rifle Fire Protection District? _____ If yes, list jobs held and dates employed.

Do you have any relatives who work for or serve in an elected or appointed position for the agencies listed above? _____ If yes, name(s):

Are you willing to work (check all that apply):

Overtime _____ Shifts _____ Part-time _____

Weekends _____ Holidays _____ Temporary _____

EDUCATION			
SCHOOL	LOCATION	COURSES(S)	DEGREE/DIPLOMA_____
High School			
College			
Other			
Other			

Level of Emergency Medical Technician training:

Attach copy of certificate

Basic _____ Intermediate _____ Paramedic _____ Expiration date: _____

Level of structural fire fighting training:

Attach copy of certificate

FireFighter 1 _____ FireFighter II _____ FireOfficer 1 _____

Other _____ Expiration date: _____

Have you completed hazardous materials training? _____ Level _____

Attach copy of certificate

List licenses or certificates you hold which would be helpful in this position. _____

Briefly describe your experience in emergency services. _____

Do you have a valid Colorado Drivers License? _____

Attach copy of license

Number: _____ Class: _____ Exp. Date: _____

Are your driving privilege suspended or revoked by any other State? _____ State: _____

List any other volunteer and/or community work or activities you feel might be helpful in determining your eligibility for employment: _____

When would you be available to start work? _____

EMPLOYMENT EXPERIENCE

Attach additional sheets if necessary

Name of Employer		Telephone
Address	City, State, Zip Code	Employed (mo/yr)
		From _____ To _____
Title	Name of Last Supervisor	Pay
		Start \$ _____ Final \$ _____
Reason for leaving		How many supervised
Duties		

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		Start \$ _____ Final \$ _____
Reason for leaving		How many supervised
Duties		

Read carefully and initial each paragraph before signing.

By my signature and initials placed below, I affirm under the penalty of perjury that the information provided in this employment application (and accompanying resume, if any) is provided voluntarily, is true and complete. And I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment, even if the omission or falsehood does not directly relate to my job or is not discovered for many years.

_____ Initial

I give permission for a complete pre-employment physical examination, including a drug screening exam and x-rays and I consent to the release to Colorado River Fire Rescue any and all medical information as may be deemed necessary, by the agency, in judging my capability to do the work for which I am applying.

_____ Initial

I authorize the investigation of all statements contained in this application. I also authorize contact with my present employer, past employers and any listed references.

_____ Initial

I authorize any persons, schools, current employers and organization named in this application form to provide Colorado River Fire Rescue with relevant information and opinions that may be useful in making a hiring decision, and I release such persons and organizations from any legal liability for such information furnished.

_____ Initial

I understand that this application does not, by itself, create a contract of employment. I understand and agree that, if hired, my employment is for no definite period of time and may, regardless of the date of payment of my wages or salary, be terminated at any time subject to the provision of the Personnel Manual as the same may be amended. I understand that no person is authorized to change any of the terms mentioned in this employment application form.

_____ Initial

Date: _____ Signature: _____

List three personal references including name, address, work and home telephone numbers.

1. _____
2. _____
3. _____