

FAILURE TO FULLY COMPLETE THE APPLICATION MAY RESULT IN YOUR REJECTION FROM THE RECRUITMENT.

APPROVED BY



South Placer Fire District  
 6900 Eureka Road  
 Granite Bay, CA 95746  
 Telephone (916) 791-7059



Application \_\_\_\_\_  
 Physical Agility \_\_\_\_\_  
 Back Ground \_\_\_\_\_  
 Medical \_\_\_\_\_  
 DMV/Auto Ins. \_\_\_\_\_  
 Personnel \_\_\_\_\_

**APPLICATION FOR EMPLOYMENT**  
 (PLEASE TYPE OR PRINT IN BLACK INK)

1. POSITION APPLIED FOR: \_\_\_\_\_

2. NAME: (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_

3. Mailing Address: \_\_\_\_\_  
 (Street/PO Box) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

4. Phone: ( ) \_\_\_\_\_ E-mail address: \_\_\_\_\_

5. In case of Emergency, notify: Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

**READ FULLY (ANSWER BY CHECKING)**

Yes No

6. Do you object to the District making an inquiry of your present or past employers?		
7. Citizenship: If you are not a U.S. Citizen, do you have the legal right to remain permanently in the U.S.? (Proof required, if hired)		
8. Age: Are you over the age of 18? (Proof required, if hired)		
9.. Do you have a valid driver's license? _____ List Endorsements: _____ State _____ Type of Lic. _____ DL Number _____		
10. Are you able, with or without reasonable accommodation, to perform the essential functions as stated in the announcement? Hiring will be contingent on passing a physical examination.		

**IF YOU ANSWER YES TO QUESTIONS #11, #12. PLEASE GIVE DETAILS BELOW**

11. Have you, as an adult, been convicted (including payment of a fine or placement on probation) of a violation of the law? <i>A yes answer will not automatically disqualify you.</i>		
12. Have you been convicted (including payment of a fine or placement on probation) of a moving traffic violation? List all moving violations within the last 5 years. <i>A yes answer will not automatically disqualify you.</i>		
13. Space below is provided for an explanation, if necessary for questions #10, & #11 (attach separate sheet if needed)		

**JOB-RELATED SCHOOLING & TRAINING**

14. EDUCATION: (Circle Highest Grade Completed)	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
NAME AND LOCATION OF COLLEGE, UNIVERSITY BUSINESS, CORRESPONDENCE, TRADE OR SERVICE SCHOOLS	COURSES OF STUDY												Completed		Degree			
													Semester Units	Quarter Units				

**Certificates of Training, Licenses, or Professional Registration**

Name of Certificate/License/Registration	Date Issued	Registration Number

<b>DO NOT INDICATE "SEE RESUME"</b> . List all jobs in the last 10 years. Describing your job duties and military experience. If qualifying experience is part time, be sure to list the number of hours per week spent in doing the work. You may use additional sheets if necessary. Begin with your present job and work backwards.		
From: ____/____ To: ____/____ <i>Month Year Month Year</i>	Title of Position:	NUMBER OF HOURS WORKED PER WEEK _____
Name & Address of Employer:	Your Duties Were:	
Contact Telephone Number: ( )		
Name & Title of Supervisor:		
From: ____/____ To: ____/____ <i>Month Year Month Year</i>	Title of Position:	NUMBER OF HOURS WORKED PER WEEK _____
Name & Address of Employer:	Your Duties Were:	
Contact Telephone Number: ( )		
Name & Title of Supervisor:		
From: ____/____ To: ____/____ <i>Month Year Month Year</i>	Title of Position:	NUMBER OF HOURS WORKED PER WEEK _____
Name & Address of Employer:	Your Duties Were:	
Contact Telephone Number: ( )		
Name & Title of Supervisor:		
From: ____/____ To: ____/____ <i>Month Year Month Year</i>	Title of Position:	NUMBER OF HOURS WORKED PER WEEK _____
Name & Address of Employer:	Your Duties Were:	
Contact Telephone Number: ( )		
Name & Title of Supervisor:		

### CERTIFICATE OF APPLICANT

I hereby authorize any former employers to give any and all information regarding my employment and any other information, whether personal or otherwise, which may or may not be in their records. I also grant permission to the South Placer Fire District to conduct a background investigation as they deem necessary in conjunction with my employment. I hereby release South Placer Fire District for all liability for any damages whatsoever that may ensue from furnishing same.

I agree to conform to the rules and regulations of the district and to meet their standards of uniform and neatness. I understand that bonding may be a condition of employment.

I certify all information shown on this application is true and correct to the best of my knowledge. I agree to be fingerprinted, to submit to a medical examination, a drug and alcohol screening, and upon employment, to furnish such proof of age and citizenship as may be required. I understand and agree that any misstatements or omissions in material facts on any of the foregoing documents may herein subject me to disqualification or dismissal.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE