

PARIS FIRE AND RESCUE



Employment Application

APPLICANT INFORMATION

Last Name				First			M.I.	Date	
Street Address							Apartment/Unit #		
City				State			ZIP		
Phone				E-mail Address					
Date Available				Social Security No.					
Position Applied for									
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain						

EDUCATION

High School				Address					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College				Address					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
Other				Address					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		

EXPERIENCE/CERTIFICATIONS/LICENSES

FFI	YES <input type="checkbox"/>	NO <input type="checkbox"/>	FFII	YES <input type="checkbox"/>	NO <input type="checkbox"/>
MPO Pumper	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Aerial	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Other Fire					
EMR	YES <input type="checkbox"/>	NO <input type="checkbox"/>	EMT-B	YES <input type="checkbox"/>	NO <input type="checkbox"/>

EMT-A	YES <input type="checkbox"/>	NO <input type="checkbox"/>	EMT-P	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Other EMS					
Other Certs					

*Please submit all certifications and other pertinent information along with application.

PREVIOUS EMPLOYMENT					
Company			Phone		
Address			Supervisor		
Job Title		Starting Salary	\$	Ending Salary	\$
Responsibilities					
From	To	Reason for Leaving			
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Company			Phone		
Address			Supervisor		
Job Title		Starting Salary	\$	Ending Salary	\$
Responsibilities					
From	To	Reason for Leaving			
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Company			Phone		
Address			Supervisor		
Job Title		Starting Salary	\$	Ending Salary	\$
Responsibilities					
From	To	Reason for Leaving			
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	

MILITARY SERVICE	
Branch	From To

Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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