



Sebastopol Fire Department Application for Volunteer Firefighter

First Name	Last Name		
Street Address	City	State	Zip Code
Home Phone	Work Phone	Cell Phone	
Email Address (Please print clearly)			
Prior to employment, can you submit verification of your legal right to work in the United States?		YES	NO
Valid California Driver's License? YES	NO	State:	Type: Number: Expiration:

EDUCATION AND TRAINING

Name of School	Location	Degree/Diploma/ Certificate	# of Units
High School		Did you graduate? GED or Equivalent	YES NO
College or University			
Other Schools			

ARE YOU BILINGUAL? YES NO If YES, list language:

DESCRIBE ANY JOB RELATED SKILLS, KNOWLEDGE, SPECIAL TRAINING OR LICENSING YOU POSSESS:

REFERENCES

NAME	ADDRESS	PHONE NUMBER	OCCUPATION

EQUAL OPPORTUNITY EMPLOYER: The Sebastopol Fire Department is an Equal Opportunity Employer. It also advises that it does not discriminate on the basis of handicapped or other protected class status in admission or access to, or treatment or employment in, it's programs and activities

EXPERIENCE

List all work experience in the last 10 years. Begin with the most recent experience first. You may attach your resume or any other job related items. Be specific describing work and military experiences. Be sure to list each change in title or promotion separately. If qualifying experience is part-time, be sure to list the number of hours per week spent doing the work. You may use additional sheets if necessary. **DO NOT INDICATE "SEE RESUME"**

From (mm/yyyy): _____ **To: (mm/yyyy):** _____ **Title:** _____

Name of Employer: _____ **Address:** _____

Supervisor: _____ **Supervisor's Title:** _____

List Duties Performed: _____

Reason For Leaving: _____

From (mm/yyyy): _____ **To: (mm/yyyy):** _____ **Title:** _____

Name of Employer: _____ **Address:** _____

Supervisor: _____ **Supervisor's Title:** _____

List Duties Performed: _____

Reason For Leaving: _____

From (mm/yyyy): _____ **To: (mm/yyyy):** _____ **Title:** _____

Name of Employer: _____ **Address:** _____

Supervisor: _____ **Supervisor's Title:** _____

List Duties Performed: _____

Reason For Leaving: _____

AGREEMENT

I certify that all the statements herein are true, and I understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

I understand that Sebastopol Fire Department will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I understand and agree that I may be required to undergo drug screening and physical and psychological examinations, and I agree and consent to take such examinations at such time as designated by the department and to release the department, its directors, officers, agents, or employees from any claim arising in connection with the use of such tests.

I understand this application will be active for a period of one year; after that time, if I wish to be considered for employment, I must submit a new application.

I understand this application is not a contract of employment.

SIGNATURE

DATE