



EL MEDIO FIRE DEPARTMENT

INTERN FIREFIGHTER APPLICATION

Personal Information

Name: _____
Last First Middle

Current Address: _____
Street Address Space/Apt # City State Zip Code

Last 4 of your SSN: _____ E-Mail: _____

Home Phone: _____ Cell Phone: _____

Driver's License #: _____ Current: Yes No State of issue: _____ Class: _____

Do you have a valid High School Diploma / G.E.D.? Yes No

Are you at least 18 years of age? Yes No

To your knowledge, do you have any physical or mental defects which would prevent you from fully and safely performing the duties of a firefighter? Yes No
If "yes", please provide details:

Educational Background

Type of School	Name of School	Location (city & State)	# of Years Completed	Did you Graduate?

Special Skills / Licenses / Certification

Please list any additional skills and/or all certificates, documents, licenses, and professional designations that you have to indicate your particular area of expertise or training relative to emergency services.



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Employer Information

Beginning with your current or most recent position, list all positions you have held for at least the last 10 years; account for periods of unemployment. **Each title change or promotion should be listed and detailed separately.** If additional space is needed, please make copies of this page or attach additional sheets in a similar format.

From: / /	Employer:
To: / /	Address:
Total Yrs: Mos:	Job Title/Assignment:
Hours/Week:	Duties
Number Supervised:	
Last Salary:\$ /mo	
Supervisor: Title: Phone: ()	
Reason for leaving:	

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Emergency Contacts

Please provide at least one (1) emergency contact.

1. _____
Name Phone Number Relationship
Street Address City State Zip Code

2. _____
Name Phone Number Relationship
Street Address City State Zip Code

References

Name	Occupation	Phone Number	Relationship

*** ALL FIREFIGHTERS MAY BE SUBJECT TO A CRIMINAL BACKGROUND CHECK ***

1. Have you ever been convicted of a felony or misdemeanor? Yes No

If "Yes", please explain:

2. Has your driver's license ever been suspended or revoked? Yes No

If "Yes", please explain:

PLEASE ATTACH COPIES OF THE FOLLOWING:

- Drivers License
- CSFM Firefighter I/ Completion of certified Firefighter I Academy
- CPR/ First Aid Card

- EMT- B certificate
- CPAT
- Resume



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Applicant's Certification and Release

I certify that all answers to questions in this application and additional information I may have submitted are true and complete to the best of my knowledge. I understand that giving false information, misrepresenting facts, and material omissions may be grounds for denial of employment or discharge if hired. I hereby authorize investigation of all statements and references provided during the application process to give the El Medio Fire Department any and all pertinent information they may have, personal or otherwise, release from all liability or responsibility, El Medio Fire Department any agent of either entity and all persons, companies or corporations providing information to El Medio Fire Department about me. By signing, you have agreed to the terms and conditions of this application.

Applicant Signature: _____

Date: _____

** Verification only upon acceptance*

Acceptance Date

Officer Signature

EMFD Authorized Signature