

MONROE TOWNSHIP FIRE DEPARTMENT
315 S. FERGUSON STREET
PO Box 88
HENRYVILLE, INDIANA 47126
(812) 294-1738
"At Your Service Since 1949"

EMPLOYMENT APPLICATION

An Equal Opportunity/Affirmative Action Employer

PRINT OR TYPE IN INK. Fill out all sections COMPLETELY and ACCURATELY. Your application will be used as part of the examination process and therefore, should represent your best effort. Unsigned or incomplete applications will not be considered. FALSE answers may lead to rejection of application and/or dismissal. Once submitted, application materials become property of the Monroe Township Fire Department. Attach additional pages if needed. The Monroe Township Fire Department does not accept FAXED applications. Photocopied applications must have an original signature and current date. Please write the letters "NA" (Not Applicable) in those sections, which do not apply, to you. Attach additional pages if needed.

CURRENT INFORMATION

(1) Date of Application: _____

(2) Position Desired: _____

(3) When will you be available for employment (i.e. immediately, 2 weeks' notice):

(4) Are you seeking: [] Full-time [] Part-time [] Support (Volunteer) Team

(5)
Name: _____

(Last) (First) (Middle)

(6)
Address: _____

Street & No. or P.O. Box; City, State, Zip

(7) Home Phone # () _____ Cell. Phone # () _____

E-MAIL: _____

(8) Are you 18 years of age or older? [] Yes [] No

(9) List all other names, including maiden name and nicknames, by which you are known or have been known.

(10) List all former addresses you have had during the past five years.

GENERAL INFORMATION

If you need to explain any answers, use the space under **EXPLANATIONS** near the end of this application.

(11) Check conditions that you are willing to accept.

Occasional: night work weekend work overtime rotating shifts * + "on-call"
Regular: night work weekend work overtime rotating shifts * + "on call"
Frequent: night work weekend work overtime rotating shifts * + "on call"

(12) Have you ever been employed with the Monroe Township Fire Department? Yes No

If "YES",

when: _____

(13) Have you ever applied to the Monroe Township Fire Department? Yes No

If "YES", indicate what position and

when: _____

(14) Are you now, or were you previously, related in any way to a Monroe Township Fire Department employee? Yes No

If "YES", give name and

relationship: _____

(15) Are you able to perform all of the duties of the job you have applied for? Yes No

(16) Do you have any allergies or other significant medical conditions Yes No

If "Yes", please describe here _____

(17) List all Traffic and criminal convictions:

Charge	Location (City/State)	Date	Disposition of Charge

(18) Have you ever been convicted of a felony? Yes No

If "YES", please explain under **EXPLANATIONS**. (NOTE: A "YES" will not automatically disqualify you from consideration.)

(19) Are you an American citizen or do you currently have authorization to work in the U.S.? Yes No

(20) Did you receive any of your education or employment experience under another name? Yes No

If "YES", please explain under **EXPLANATIONS**.

EDUCATION

Provide your complete history

(21) Indicate highest school year completed: (i.e. 8, 12, 16) _____

(22) Name of High School _____ City _____
 State _____

(23) Have you received a high school diploma or equivalent? [] Yes [] No

Education Beyond High School	Name and Location	Attended: From Mo. Yr. To Mo. Yr.	Did You Graduate ?	Credit Hours	Degree, Diploma Certificates Earned or No. of Years	Major / Minor
College(s) University(ies)						
Graduate or Professional Schools						
Technical Institutions, Internship, Other						

(Please provide a copy of your High School Diploma, GED, or High School Transcript with your completed application)

KNOWLEDGE, SKILLS & ABILITIES

(24) Please list any knowledge, skills or abilities you have that you feel are applicable to the position for which you are applying.

Include Skills with equipment or machines you can operate.

(a) _____ (e) _____

(b) _____ (f) _____

(c) _____ (g) _____

(d) _____ (h) _____

REGISTRATION, LICENSES & CERTIFICATIONS

(25) If you currently are or have been a firefighter please list your ACADIS / Firefighter Number:

(26) List fields of work for which you have been registered, licensed or certified:

Registration: _____ State: _____ No: _____ Exp. Date: _____

Registration: _____ State: _____ No: _____ Exp. Date: _____

Registration: _____ State: _____ No: _____ Exp. Date: _____

Registration: _____ State: _____ No: _____ Exp. Date: _____

Other: _____

(Please provide a copy of any certifications with your completed application)

(27) Please list your **VALID DRIVER'S LICENSE NUMBER** and the state in which it was issued.
If you do not have a driver's license please put "NONE" in the blank -

Number: _____ **State:** _____

Expires: _____

(Please provide a copy of your driver's license with your completed application)

(28) Is your driver's license for a Commercial Driver's License? [] Yes [] No

EMPLOYMENT

Begin with your most recent job and describe in detail each specific job you have had in the last five (5) years. Periods of unemployment should also be noted. Leave no gaps in time sequence. Be sure to list all applicable experience, which qualified you for the position sought. If needed, additional sheets containing the same information and in the same format are acceptable. Include military and related volunteer experience. Be sure to account for gaps in your employment history.

ALL SPACES MUST BE COMPLETED OR MARKED N/A (not applicable). "See attached resume" is NOT acceptable in the duties space. Please attach additional sheets if needed.

If you have previous firefighting experience from fire agencies, please list them below. If the position was as a volunteer, please list "VOLUNTEER" in the salary section.

A. CURRENT OR MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE _____ Starting Salary _____ Last

Salary _____

Date employed _____ Date separated _____

Employer or company _____ Telephone #

(____) _____

Employer or company
address _____

Name and title of most current
supervisor _____

Full-time for: Yrs. ____ Mos. ____ Part-time for: Yrs ____ Mos. ____ # of employees supervised by
you _____

If you worked part-time, the number of hours worked per week _____

DUTIES IN ORDER OF
IMPORTANCE _____

REASON FOR LEAVING or desiring
change _____

B. PREVIOUS EMPLOYMENT (or explain gap in employment)

JOB TITLE _____ Starting Salary _____ Last

Salary _____

Date employed _____ Date separated _____

Employer or company _____ Telephone #

(____) _____

Employer or company
address _____

Name and title of most current
supervisor _____

Full-time for: Yrs. ____ Mos. ____ Part-time for: Yrs ____ Mos. ____ # of employees supervised by
you _____

If you worked part-time, the number of hours worked per week _____

DUTIES IN ORDER OF
IMPORTANCE _____

Monroe Township Fire Department (MTFD)

REASON FOR LEAVING or desiring change

C. PREVIOUS EMPLOYMENT (or explain gap in employment)

JOB TITLE Starting Salary Last

Salary

Date employed Date separated Telephone #

Employer or company ()

Employer or company

address

Name and title of most current supervisor

Full-time for: Yrs. Mos. Part-time for: Yrs Mos. # of employees supervised by you

If you worked part-time, the number of hours worked per week

DUTIES IN ORDER OF IMPORTANCE

REASON FOR LEAVING or desiring change

(29) Have you ever had disciplinary action taken against you? [] Yes [] No If "YES" explain under EXPLANATIONS. (A "YES" will not automatically disqualify you.)

(30) a). Have you ever been dismissed or forced to resign from any job held? [] Yes [] No b). Were you dismissed or forced to resign for disciplinary reasons? [] Yes [] No If "YES" to "a" or "b", explain under EXPLANATIONS (A "YES" will not automatically disqualify you.)

(31) May we contact your present employer for reference prior to an interview (if granted)? [] Yes [] No If you are not currently employed, please check here N/A. If "NO" explain under EXPLANATIONS.

(32) Have you ever served in the military? [] Yes [] No If "Yes", complete the following:

Dates - From: To:

Branch:

Rank at time of Discharge:

Were you honorably discharged? [] Yes [] No If "NO" explain under EXPLANATIONS. (A "NO" will not automatically disqualify you).

REFERENCES

List the name, address and telephone number of three (3) persons who are not related to you and are not previous employers, who have known you for at least two (2) years.

EXPLANATIONS

ITEM # []

ITEM # []

ITEM # []

ITEM # []

ITEM # []

ITEM # []

ITEM # []

ITEM # []

Certification and Release (MUST BE SIGNED AND DATED BELOW)

- To the best of my knowledge and belief, the information given truly represents my background and experience. I understand that if I have knowingly or negligently misrepresented, falsified or omitted any information during the application process, or have made any changes to the format or wording of this application form, I may be disqualified for employment consideration or dismissed from employment with the Fire Department.
- I authorize my current and former employers to give any information regarding my employment, or me whether or not it is on their records. I hereby release them from any damage whatsoever for issuing the same.
- I also authorize educational institutions, which I attended to reveal my scholastic ratings, as well as degrees or certificates earned, to the Monroe Township Fire Department and associations, registration and licensing boards and to others to furnish whatever detail is available concerning my qualifications. Notwithstanding any provision of State or Federal law, I expressly waive any right I have to review the information the Monroe Township Fire Department receives from an employer or educational institution under a promise of confidentiality.
- I also permit the Monroe Township Fire Department to conduct a Police, Court, Credit and/or Motor Vehicle Records Investigation of my background.
- I understand that if I apply or have applied for certain jobs, I may be tested for drug and alcohol to determine if I am currently abusing these substances. I consent to the testing and understand that the results could preclude my appointment.
- I understand and acknowledge that should I be employed (paid or volunteer) by the Monroe Township Fire Department, then I serve a one year probation period, as outlined by departmental policy, and I may be terminated at any time with or without cause.

SIGNATURE _____

DATE _____

PRINTED _____