HAZARDVILLE FIRE DISTRICT

APPLICATION FOR EMPLOYMENT/MEMBERSHIP

The Hazardville Fire District is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis prohibited by law. The Company considers applicants for all positions without regard to race, color, religion, gender, national origin/ancestry, age, disability, marital status, sexual orientation, gender identity/expression, or any other legally protected status. The Company is committed to providing equal opportunity in compliance with all applicable laws.

PERSONAL INFORMATION

Last Name	First Name	Middle	DOB

Address: Number	Street	City	State	Zip Code

Telephone Number(s): Home	Work	Cell

Email Address:

Driver's License Number	State	Expiration Date	SSN

How did you hear about us? ☐ Newspaper ☐ Internet ☐ Other _____

If employment is offered, can you produce documentation required by law to establish work authorization and identity? ☐ Yes ☐ No

EMPLOYMENT DESIRED

Position(s) applied for: _____ Hourly Rate/Salary desired? _____

On what date would you be available to work? _____

Are you available to work: ☐ Full-time ☐ Part-time

Can you work overtime if your job requires it? ☐ Yes ☐ No

Are there any hours or days you cannot or will not work? If yes, please explain. ☐ Yes ☐ No

EDUCATION AND TRAINING

	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
Secondary School			5 6 7 8	
High School, Prep School			9 10 11 12	
College, University			1 2 3 4	
Graduate, Trade, Business School				

Describe any specialized training, licenses or certifications: _____

Has any license or certification you have held been surrendered, suspended or revoked for any reason? If so, please explain: _____

EMPLOYMENT EXPERIENCE

Have you ever been dismissed, involuntarily terminated or forced to resign from employment? ☐ Yes ☐ No
If yes, please explain: _____

_____

Starting with your ***most recent employment***, provide your complete employment history for the past 10 years. Include any job-related military service assignments and volunteer activities. Please be aware that your current employer may be contacted unless you ask us not to do so. If you provide a resume, you must still provide all this information.

Employer _____ From _____ To _____

Address _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving _____

Employer _____ From _____ To _____

Address _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving _____

Employer _____ From _____ To _____

Address _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving _____

Employer _____ From _____ To _____

Address _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving _____

Employer _____ From _____ To _____

Address _____

Telephone Number(s) _____ Job Title _____

Duties & Accomplishments _____

Supervisor (Name and Title) _____

Reason for leaving _____

(If you need additional space, please continue on back of application or attach additional sheets.)

PROFESSIONAL REFERENCES

Please provide names of 3 professional references, not related to you, who you have known at least one year.

NAME	TITLE	HOME PHONE	BUSINESS PHONE

1. _____
2. _____
3. _____

SKILLS AND EXPERIENCE

State any other skills or experience relevant to the job for which you are applying that you think may be helpful to us in considering your application:

AT-WILL EMPLOYMENT DISCLAIMER AND APPLICANT'S AGREEMENT AND CERTIFICATION

I certify that the answers given in this application are true to the best of my knowledge, I understand that the use of this application form does not indicate that there are any positions open and does not in any way obligate The District.

In consideration of my employment, I agree to conform to the policies and procedures of the Company as they may from time to time be implemented or revised and agree that my employment and compensation are "at-will" and can be terminated with or without cause at any time for any lawful reason at the option of either the Company or me. I understand that should I be granted an interview, no representations that may be made at the interview are to be construed as creating any obligation, promise or contract on behalf of the Company that in any way would limit the Company's right to terminate my employment at will. I understand that no supervisory, management or any other employee at the Company has any authority to make a commitment of guaranteed or continuing employment to me, and no document or publication of the Company or conduct of anyone at the Company should be interpreted to make such a guarantee, unless the President of the Company specifically acknowledges such change in writing.

I understand that false or misleading information given in my application, resume, interview or during the course of my employment may result in withdrawal of a job offer or discipline up to and including termination of employment, whenever the omission or falsehood is discovered. I understand that acceptance for employment shall depend on satisfactory replies from my references and satisfactory results from any other required background checks or pre-employment tests. I understand that I may be subject to a drug test and/or a medical examination that I must pass as a condition of employment. I understand that if I am paid a weekly salary rather than an hourly rate, my salary is intended to compensate me for all hours I work, including any hours in excess of 40 hours in a work week.

I have read, understood and agree to the foregoing.

_____ _____

Signature of Applicant Date

NOTICE TO APPLICANTS REGARDING PRE-EMPLOYMENT DRUG TESTING

Any individual applying for employment with the District may be required to submit to a urinalysis drug test as a mandatory part of the employment application process.

This notice serves as a written statement of the Company's intention to conduct drug testing as part of the application process. The testing will be conducted in accordance with the procedures required by applicable state and federal regulations. Tested applicants will be given a copy of any positive test result. All test results shall be considered confidential by the Company and shall not be disclosed to the employees of the Company, or any other person, other than to those persons for whom such disclosure is necessary. Positive test results, or a refusal to sign this consent form and participate in pre-employment drug testing, shall be grounds for denial of employment. Arrangements for testing will be made by a representative of the Company in consultation with each applicant. Cooperation in scheduling the testing is important for processing an application.

Further, the Company prohibits employees from possessing or being under the influence of alcohol or illegal drugs while performing work-related functions. Failure to consent to a properly requested test for drugs or alcohol during the course of employment or failing a drug or alcohol test is grounds for termination of employment.

By signing below, you consent to be drug tested and acknowledge you have thoroughly read the foregoing notice and policy, and you understand and agree that in order to be considered for employment with the Company, you will comply in full with the Company's drug and alcohol policies.

Applicant Signature: _____ Date: _____

Printed Name: _____