



"Customer Service – Whatever It Takes!"

NORTHWEST FIRE DISTRICT

5225 W. Massingale Road ~ Tucson, Arizona 85743
(520) 887-1010

Date of Application: _____

EMPLOYMENT APPLICATION

RESUMES WILL NOT BE ACCEPTED IN PLACE OF THIS COMPLETED APPLICATION!



Revised 1/2012

THIS APPLICATION IS ONLY VALID FOR OPEN ADVERTISED POSITIONS. NORTHWEST FIRE DISTRICT IS NOT OBLIGATED TO RETAIN OR CONSIDER THIS APPLICATION FOR FUTURE OPENINGS. INSTRUCTIONS: Please complete all items. The information you provide will allow us to consider you for the open position you desire. All information you provide will be used only for employment purposes. **PLEASE PRINT ALL RESPONSES EXCEPT YOUR SIGNATURE. DO NOT USE PENCIL** You may attach a resume and any applicable certifications to this application. Northwest Fire District is an EQUAL OPPORTUNITY EMPLOYER.

Position Desired: _____ (One position per Application)

Date Available: _____ Full-Time Part-Time

Wage Desired: _____

Availability: Mornings Afternoons Evenings Overtime Restrictions?

Yes No

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

HOW MAY WE CONTACT YOU?

Home: _____ Work: _____

Message: _____ Cell: _____

Email: _____

Name:

(Last) (First) (Middle Initial)

Address:

(Street) (Apartment #)

(City) (State) (Zip)

Please answer **ONLY** if applying for **Suppression Position** (including Wildland):

I am 18 years of age or older Yes No

How did you hear about this position? (please be specific)

Newspaper: _____

Internet: _____

Agency Referral: _____

School: _____

NWFD Employee: _____

Friend: _____

Other: (please specify) _____

Do you have any relatives working for NWFD?

Yes No

If yes, state name(s) of relative(s) and relationship(s):

Social Security Number:

Have you ever applied with Northwest Fire District before? Yes No

If yes, list position(s) and date(s):

CRIMINAL CONVICTIONS/TRAFFIC VIOLATIONS: Have you ever been convicted of:

1. A misdemeanor, gross misdemeanor or felony (excluding juvenile adjudication)? Yes No 2. A moving traffic violation within the last five years? Yes No

If yes, ATTACH STATEMENT giving date(s), time(s), location(s), circumstance(s), and dollar amount of fine(s). Include any condition of your parole and/or probation, if applicable. Moving traffic violations will only be considered if driving a vehicle is a job requirement. A criminal conviction is not an automatic bar to employment. Each case is considered on its individual merits. LACK OF REQUESTED INFORMATION IS BASIS FOR REJECTING AN APPLICATION.

Have you ever been fired, forced to resign, or resigned in lieu of termination? Yes No If yes, please explain:

Employer's Name: _____ Date: _____ Reason: _____

Please indicate Military Status. Branch: _____ Active Reserve Discharged FINAL RANK: _____ Not Applicable

TO AVOID REJECTION, PLEASE ANSWER ALL QUESTIONS COMPLETELY!!

EMPLOYMENT RECORD – In the spaces below, account for all the time for the past ten (10) years, whether working or not. **START WITH YOUR MOST RECENT EXPERIENCE AND WORK BACKWARD.** Include military service and any periods of unemployment. Give COMPLETE names and addresses. If self-employed, give firm name. Attach individual sheets, if necessary to cover the past ten (10) years. **Do not say, "See Attached Resume."** **IF YOU ARE CURRENTLY EMPLOYED, WE WILL NOT CONTACT YOUR EMPLOYER UNTIL OFFERED EMPLOYMENT.**

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----|-----------|-----|-------------------------------|------|------------------------------|--|--------------|--|---------------------------------|-----|--|-----|-------------------------------|------|------------------------------|--|--|--|---------------------------|--|--|--|
| JOB 1 (<i>Current or most recent employer</i>) | | | | | | POSITION: | | JOB 3 | | | | | | POSITION: | | | | | | | | | |
| FROM | | TO | | TOTAL | | Name and Address of Employer | | | | FROM | | TO | | TOTAL | | Name and Address of Employer | | | | | | | |
| Mo. | Yr. | Mo. | Yr. | Yrs. | Mos. | | | | | Mo. | Yr. | Mo. | Yr. | Yrs. | Mos. | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Starting Pay: \$ _____ per ____ | | | | Ending Pay: \$ _____ per ____ | | Supervisor: _____ | | | | Starting Pay: \$ _____ per ____ | | | | Ending Pay: \$ _____ per ____ | | Supervisor: _____ | | | | | | | |
| Company Phone: _____ | | | | | | | | | | FAX # (if known): _____ | | Company Phone: _____ | | | | | | | | FAX # (if known): _____ | | | |
| Duties: _____ | | | | | | | | | | Reason for Leaving: _____ | | Duties: _____ | | | | | | | | Reason for Leaving: _____ | | | |
| BETWEEN JOB 1 AND JOB 2: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____ | | | | | | | | | | | | BETWEEN JOB 3 AND JOB 4: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____ | | | | | | | | | | | |
| From (mo/yr): _____ To(mo/yr): _____ | | | | | | | | | | | | From (mo/yr): _____ To(mo/yr): _____ | | | | | | | | | | | |
| Explanation: _____ | | | | | | | | | | | | Explanation: _____ | | | | | | | | | | | |
| JOB 2 | | | | | | POSITION: | | JOB 4 | | | | | | POSITION: | | | | | | | | | |
| FROM | | TO | | TOTAL | | Name and Address of Employer | | | | FROM | | TO | | TOTAL | | Name and Address of Employer | | | | | | | |
| Mo. | Yr. | Mo. | Yr. | Yrs. | Mos. | | | | | Mo. | Yr. | Mo. | Yr. | Yrs. | Mos. | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Starting Pay: \$ _____ per ____ | | | | Ending Pay: \$ _____ per ____ | | Supervisor: _____ | | | | Starting Pay: \$ _____ per ____ | | | | Ending Pay: \$ _____ per ____ | | Supervisor: _____ | | | | | | | |
| Company Phone: _____ | | | | | | | | | | FAX # (if known): _____ | | Company Phone: _____ | | | | | | | | FAX # (if known): _____ | | | |
| Duties: _____ | | | | | | | | | | Reason for Leaving: _____ | | Duties: _____ | | | | | | | | Reason for Leaving: _____ | | | |
| BETWEEN JOB 2 AND JOB 3: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____ | | | | | | | | | | | | BETWEEN JOB 4 AND JOB 5: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____ | | | | | | | | | | | |
| From (mo/yr): _____ To(mo/yr): _____ | | | | | | | | | | | | From (mo/yr): _____ To(mo/yr): _____ | | | | | | | | | | | |
| Explanation: _____ | | | | | | | | | | | | Explanation: _____ | | | | | | | | | | | |

EMPLOYMENT RECORD CONTINUED

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|-----|-----------|--------------------|--------------|------|--------------------------------|--|--|--|--|--|---|-----|-----------|--------------------|--------------|------|--------------------------------|--|--|--|--|--|
| JOB 5 | | | | | | POSITION: | | | | | | JOB 7 | | | | | | POSITION: | | | | | |
| FROM | | TO | | TOTAL | | Name and Address of Employer | | | | | | FROM | | TO | | TOTAL | | Name and Address of Employer | | | | | |
| Mo. | Yr. | Mo. | Yr. | Yrs. | Mos. | | | | | | | Mo. | Yr. | Mo. | Yr. | Yrs. | Mos. | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Starting Pay: | | | Ending Pay: | | | | | | | | | Starting Pay: | | | Ending Pay: | | | | | | | | |
| \$ _____ per ____ | | | \$ _____ per ____ | | | | | | | | | \$ _____ per ____ | | | \$ _____ per ____ | | | | | | | | |
| Supervisor: _____ | | | | | | | | | | | | Supervisor: _____ | | | | | | | | | | | |
| Company Phone: _____ | | | | | | FAX # (if known): _____ | | | | | | Company Phone: _____ | | | | | | FAX # (if known): _____ | | | | | |
| Duties: | | | | | | Reason for Leaving: | | | | | | Duties: | | | | | | Reason for Leaving: | | | | | |
| BETWEEN JOB 5 AND JOB 6: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____ From (mo/yr): _____ To(mo/yr): _____ | | | | | | | | | | | | BETWEEN JOB 7 AND JOB 8: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____ From (mo/yr): _____ To(mo/yr): _____ | | | | | | | | | | | |
| Explanation: _____ | | | | | | | | | | | | Explanation: _____ | | | | | | | | | | | |
| JOB 6 | | | | | | POSITION: | | | | | | JOB 8 | | | | | | POSITION: | | | | | |
| FROM | | TO | | TOTAL | | Name and Address of Employer | | | | | | FROM | | TO | | TOTAL | | Name and Address of Employer | | | | | |
| Mo. | Yr. | Mo. | Yr. | Yrs. | Mos. | | | | | | | Mo. | Yr. | Mo. | Yr. | Yrs. | Mos. | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Starting Pay: | | | Ending Pay: | | | | | | | | | Starting Pay: | | | Ending Pay: | | | | | | | | |
| \$ _____ per ____ | | | \$ _____ per ____ | | | | | | | | | \$ _____ per ____ | | | \$ _____ per ____ | | | | | | | | |
| Supervisor: _____ | | | | | | | | | | | | Supervisor: _____ | | | | | | | | | | | |
| Company Phone: _____ | | | | | | FAX # (if known): _____ | | | | | | Company Phone: _____ | | | | | | FAX # (if known): _____ | | | | | |
| Duties: | | | | | | Reason for Leaving: | | | | | | Duties: | | | | | | Reason for Leaving: | | | | | |
| BETWEEN JOB 6 AND JOB 7: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____ From (mo/yr): _____ To(mo/yr): _____ | | | | | | | | | | | | <input type="checkbox"/> I am attaching additional sheets to cover a ten (10) year employment history. | | | | | | | | | | | |
| Explanation: _____ | | | | | | | | | | | | | | | | | | | | | | | |

CERTIFICATION, AUTHORIZATION, RELEASE AND WAIVER

READ CAREFULLY BEFORE SIGNING

- I certify that the information given by me in this Employment Application is true and complete and I understand and agree that the application process or my employment with NWFD may be immediately discontinued if misrepresentations, falsified statements, or material omissions are found to have been made. I authorize investigatory agencies, schools, former employers and former supervisors to provide any and all information pertinent to my employability, and hereby release those providing such information from any liability for doing so.
- I understand that this application is only valid for the position applied for at present, and that Northwest Fire District is not obligated to retain or consider this application for future openings.
- I understand that employment, if offered, is contingent upon satisfactory results of a drug screening, employment verification(s), criminal background check utilizing fingerprint analysis, motor vehicle report, *physical examination and *Training Academy (*if applicable) as required by the District; also upon my providing additional information for employee record purposes and proof of identity and lawful authorization to work in the U.S. and completing a form I-9.
- I understand that my employment does not constitute a contract of employment between myself and the District. I will comply with and be governed by all federal and/or state laws, District policies, rules, and procedures as may be in effect.
- It is the District's policy not to discriminate against qualified individuals with disabilities with regard to application procedures, hiring, advancement, discharge, compensation, training, or other terms, conditions, and privileges of employment. Northwest Fire District will reasonably accommodate qualified individuals with a temporary or long-term disability so that they can perform the essential functions of a job. An individual who can be reasonably accommodated for a job, without undue hardship, will be given the same consideration for that position as any other applicant.
- In order to assure a drug-free work environment, the District prohibits the use, sale, transfer, being under the influence and/or reporting to work after using or ingesting drugs. Under District policy, alcohol is included within the meaning and prohibition of drugs. All District employees are subject to post accident/incident, reasonable suspicion and other drug and alcohol testing as specified in District policy. I understand that successful passage of such drug and alcohol testing will be a condition for continued employment.
- Sexual Harassment is defined as any unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature when (1) submission to such conduct is made a job requirement, or causes changes in working terms or conditions, and/or (2) it has the effect and purpose of unreasonably interfering with work performance, or creating an intimidating, hostile, or offensive workplace. I understand that sexual harassment will not be tolerated and will be grounds for discipline, up to and including termination.
- The District has a strong commitment to its employees to provide a safe, healthy and secure work environment. While the District has no intention of intruding into the private lives of its employees, it expects all employees to report to work without possessing weapons and to perform their jobs without violence toward any other individual. I understand that workplace violence will not be tolerated and will be grounds for discipline, up to, and including, termination.
- The Northwest Fire District is compliant with the "Smoke-Free Arizona Act" pursuant to A.R.S. §36-301.01, therefore, smoking is only permitted in designated areas, and is prohibited within 20 feet of any enclosed area, and in all District facilities and vehicles.
- If employed, I hereby authorize Northwest Fire District to deduct from my earnings amounts sufficient for my payments to cover any financial liability which I may incur during my employment. This may include, but not be limited to: damage to or loss of District vehicles or property, group insurance premiums, uniform costs, lost tools, equipment and supplies, tuition reimbursement, and other appropriate situations.
- By signing this application, I am acknowledging that I have received and read a handout containing the Northwest Fire District's policies regarding Equal Employment Opportunity, Americans with Disabilities Act (ADA), Harassment/Sexual Harassment, Drug & Alcohol, Workplace Violence & Driver's License.
- I have read the above, understand its content, and meaning, and agree to all of its provisions. I understand that upon my request, I will be provided a copy of my executed employment application.

SIGN HERE:

 **DATE:**

IMPORTANT! - - - DID YOU REMEMBER TO:

- Answer all questions completely? Cover a full 10-yr. employment history? Explain all gaps in employment? Attach copies of applicable documents? Sign and date Application?