

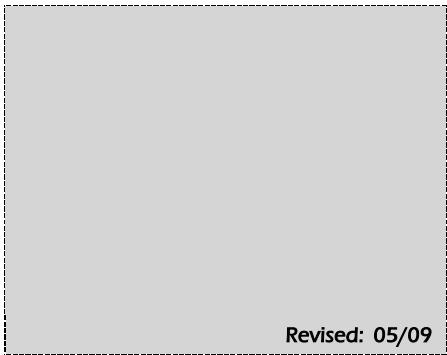


"Customer Service – Whatever It Takes!"

# NORTHWEST FIRE DISTRICT

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

Date of Application: \_\_\_\_\_



Revised: 05/09

## EMPLOYMENT APPLICATION

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

**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

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

**Social Security Number:** \_\_\_\_\_

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

1. A misdemeanor, gross misdemeanor or felony (excluding juvenile adjudication)?  Yes  No

If yes, ATTACH STATEMENT giving date(s), time(s), locations(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.

2. A moving traffic violation within the last five years?  Yes  No

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

### HOW MAY WE CONTACT YOU?

Home: \_\_\_\_\_  Work: \_\_\_\_\_  
 Message: \_\_\_\_\_  Cell: \_\_\_\_\_  
 Email: \_\_\_\_\_

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):

\_\_\_\_\_  
\_\_\_\_\_

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

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

**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.**

<b>JOB 1</b> ( <i>Current or most recent employer</i> )						<b>POSITION:</b>						<b>JOB 4</b>						<b>POSITION:</b>					
<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer						<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer					
Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.							Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.						
Starting Pay: \$ _____ per _____		Ending Pay: \$ _____ per _____										Starting Pay: \$ _____ per _____		Ending Pay: \$ _____ per _____									
Supervisor: _____						Supervisor: _____						Supervisor: _____											
Company Phone: _____						FAX # ( <i>if known</i> ): _____						Company Phone: _____						FAX # ( <i>if known</i> ): _____					
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 4 AND JOB 5: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____											
From (mo/yr): _____ To(mo/yr): _____ Explanation: _____												From (mo/yr): _____ To(mo/yr): _____ Explanation: _____											
<b>JOB 2</b>						<b>POSITION:</b>						<b>JOB 5</b>						<b>POSITION:</b>					
<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer						<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer					
Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.							Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.						
Starting Pay: \$ _____ per _____		Ending Pay: \$ _____ per _____										Starting Pay: \$ _____ per _____		Ending Pay: \$ _____ per _____									
Supervisor: _____						Supervisor: _____						Supervisor: _____											
Company Phone: _____						FAX # ( <i>if known</i> ): _____						Company Phone: _____						FAX # ( <i>if known</i> ): _____					
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 5 AND JOB 6: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____											
From (mo/yr): _____ To(mo/yr): _____ Explanation: _____												From (mo/yr): _____ To(mo/yr): _____ Explanation: _____											
<b>JOB 3</b>						<b>POSITION:</b>						<b>JOB 6</b>						<b>POSITION:</b>					
<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer						<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer					
Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.							Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.						
Starting Pay: \$ _____ per _____		Ending Pay: \$ _____ per _____										Starting Pay: \$ _____ per _____		Ending Pay: \$ _____ per _____									
Supervisor: _____						Supervisor: _____						Supervisor: _____											
Company Phone: _____						FAX # ( <i>if known</i> ): _____						Company Phone: _____						FAX # ( <i>if known</i> ): _____					
Duties: _____						Reason for Leaving: _____						Duties: _____						Reason for Leaving: _____					
BETWEEN JOB 3 AND JOB 4: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____												BETWEEN JOB 6 AND JOB 7: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____											
From (mo/yr): _____ To(mo/yr): _____ Explanation: _____												From (mo/yr): _____ To(mo/yr): _____ Explanation: _____											

## EMPLOYMENT RECORD CONTINUED

<b>JOB 7</b>						<b>POSITION:</b>						<b>JOB 10</b>						<b>POSITION:</b>					
<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer						<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer					
Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.							Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.						
Starting Pay: \$ _____ per _____			Ending Pay: \$ _____ per _____									Starting Pay: \$ _____ per _____			Ending Pay: \$ _____ per _____								
Supervisor: _____												Supervisor: _____											
Company Phone: _____						FAX # (if known): _____						Company Phone: _____						FAX # (if known): _____					
Duties: _____						Reason for Leaving: _____						Duties: _____						Reason for Leaving: _____					
BETWEEN JOB 7 AND JOB 8: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____												BETWEEN JOB 10 AND JOB 11: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____											
From (mo/yr): _____ To(mo/yr): _____ Explanation: _____												From (mo/yr): _____ To(mo/yr): _____ Explanation: _____											
<b>JOB 8</b>						<b>POSITION:</b>						<b>JOB 11</b>						<b>POSITION:</b>					
<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer						<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer					
Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.							Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.						
Starting Pay: \$ _____ per _____			Ending Pay: \$ _____ per _____									Starting Pay: \$ _____ per _____			Ending Pay: \$ _____ per _____								
Supervisor: _____												Supervisor: _____											
Company Phone: _____						FAX # (if known): _____						Company Phone: _____						FAX # (if known): _____					
Duties: _____						Reason for Leaving: _____						Duties: _____						Reason for Leaving: _____					
BETWEEN JOB 8 AND JOB 9: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____												BETWEEN JOB 11 AND JOB 12: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____											
From (mo/yr): _____ To(mo/yr): _____ Explanation: _____												From (mo/yr): _____ To(mo/yr): _____ Explanation: _____											
<b>JOB 9</b>						<b>POSITION:</b>						<b>JOB 12</b>						<b>POSITION:</b>					
<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer						<b>FROM</b>		<b>TO</b>		<b>TOTAL</b>		Name and Address of Employer					
Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.							Mo.	Yr.	Mo.	Yr.	Yrs.	Mos.						
Starting Pay: \$ _____ per _____			Ending Pay: \$ _____ per _____									Starting Pay: \$ _____ per _____			Ending Pay: \$ _____ per _____								
Supervisor: _____												Supervisor: _____											
Company Phone: _____						FAX # (if known): _____						Company Phone: _____						FAX # (if known): _____					
Duties: _____						Reason for Leaving: _____						Duties: _____						Reason for Leaving: _____					
BETWEEN JOB 9 AND JOB 10: <input type="checkbox"/> Unemployed <input type="checkbox"/> School <input type="checkbox"/> Other: _____												<input type="checkbox"/> I am attaching additional sheets to cover a ten (10) year employment history.											
From (mo/yr): _____ To(mo/yr): _____ Explanation: _____																							

<b>EDUCATION</b>	Name and Address	Major Fields of Study	Diploma, GED or Type of Degree <i>(attach copies)</i>
High School			
College or University			
Technical, Business or Other Schools			
Other skills or Training:		Professional Licenses:	Languages Spoken:
DESCRIBE ANY SPECIAL TRAINING, COURSES, OR CERTIFICATIONS RELATING TO THE POSITION YOU ARE SEEKING: <i>(attach copies of all applicable certifications)</i>			

**INDICATE BY MARKING EACH BOX FOR *ON THE JOB EXPERIENCE* IN THE FOLLOWING**

<input type="checkbox"/> Firefighter <input type="checkbox"/> EMT <input type="checkbox"/> Paramedic	<b>Fire/EMS Service</b> <input type="checkbox"/> Engineer <input type="checkbox"/> Fire Inspector <input type="checkbox"/> Wildland	<input type="checkbox"/> Fire Marshal <input type="checkbox"/> Hazardous Materials <input type="checkbox"/> Technical Rescue	<input type="checkbox"/> Accounts Receivable <input type="checkbox"/> Accounts Payable <input type="checkbox"/> Multi-Line Phones <input type="checkbox"/> Payroll Processing	<b>Clerical</b> <input type="checkbox"/> Meeting Minutes <input type="checkbox"/> FAX <input type="checkbox"/> Postage Meter <input type="checkbox"/> Customer Service	<input type="checkbox"/> Writing Correspondence	<b>Computer Proficiency</b> <input type="checkbox"/> Word <input type="checkbox"/> Excel <input type="checkbox"/> Access <input type="checkbox"/> PowerPoint	<input type="checkbox"/> Publisher <input type="checkbox"/> Visio <input type="checkbox"/> Web Publishing <input type="checkbox"/> Mail Merges
--	--	--	--	--	--	--	---

GIVE A BRIEF STATEMENT WHY YOU FEEL YOU ARE QUALIFIED FOR THIS POSITION:

**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 NWFDD 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 and Alcohol, and Workplace Violence.
- 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?