



Kimball Township Fire Department Application for Employment

(Pre-Employment Questionnaire) (The Department Is An Equal Opportunity Employer)

Today's Date:	
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PERSONAL INFORMATION:

Name: (first, middle, last)	
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Address:	
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Phone Number:		Email Address:	
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Are you 18 years or older?	Yes		No	
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Are you prevented from lawfully becoming employed in the United State because of VISA or immigration status?	Yes		No	
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EMPLOYMENT DESIRED

Position:		Date You Can Start:	
Are you currently employed?	Yes	No	If so, may we inquire of your present employer?
			Yes
			No

Have you ever applied to Kimball Township Fire Department?	Yes		No		When	
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Referred By:	
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EDUCATION:	NAME AND LOCATION OF SCHOOL	# of Years Attended	Did you graduate?	Subjects Studied
High School				
College				
Trade, Business, Graduate School				

GENERAL

Subjects of special study or research work:

Have you worked on a fire department or for an Emergency Medical Services provider? If so, how long? Where? When?

Special skills including Fire and EMS training/certifications:

Activities: (Civic, Athletic, etc.) Exclude organizations, the name of which indicates the race, creed, sex, age, marital status, color, or nation of origin of its members.

U.S. Military Service:		Rank:		Present Membership in National Guard/Reserves:	
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YOUR FORMER EMPLOYERS (List below last three employers, starting with the most recent employer first.)				
Date Month and Year	Name and Address of Employer	Supervisor	Position	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				

REFERENCES (Give the names of three persons not related to you, whom you have known at least one year.)			
Name	Phone Number	Organization	Years Acquainted
1			
2			
3			

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed may be terminated at any time.

In consideration of my employment, I agree to conform to the Fire Department's rules and regulations and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the Fire Department's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the Fire Department. I understand that no Fire Department representative, other than it's Fire Chief, and then only when in writing and signed by the Fire Chief, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing."

Date:		Signature:	
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DO NOT WRITE BELOW THIS LINE				
Interviewed by:				
Date:				
Remarks:				
Ability:				
Hired:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Position:				
Start Date:				
Applications are maintained on file for one year.				