Corona De Tucson Fire District

99 E. Tallahassee Dr.

Corona De Tucson, Az 85641

Phone: (520) 762-5007 Fax: (520) 762-5992

Office Use

Date Received:_____

Date notified:_____

Employment Application

Application Instructions:

Read the application and answer all questions completely, including any supplemental questionnaire forms. Type or print all answers. Sign this application and all other forms. Resumes may not be substituted in lieu of the requested information. Any omission, misstatement, or falsification may be cause for rejection of this application, removal of your name from an eligibility list, or dismissal from CDTFD. Applications must be received by the posted deadline. Applications and resumes may be hand delivered or emailed. CDTFD is not responsible for applications that are not posted by the deadline, are not signed, are incomplete, or are illegible.

Applicant information

Last name:_____ First Name:_____ M.I_____

Home Address: _____

City:_____ State:_____ Zip:_____

Home phone:_____ Cell Phone:_____

Position Applying for:_____ Email address:_____

Are you 18 years of age or older? ☐ Yes ☐ No

Are you a United States Citizen: ☐ Yes ☐ No

If No, are you legally allowed to work in the United States? ☐ Yes ☐No

Do you have a valid, unrestricted drivers license in Arizona? ☐ Yes ☐ No

Drivers License #:_____ State: _____CDL ☐ Yes ☐ No

List any CDL endorsements: _____

Military Service

Branch of service:_____ From:_____ To:_____

Please attach a copy of your DD214/Separation papers

Education

Do you have a high school diploma or G.E.D.? ☐Yes ☐ No

Name of High school/College/University	Major	Type of Degree	Degree complete	Credit hours
			☐Yes ☐No	
			☐Yes ☐No	
			☐Yes ☐No	

Specialized Certifications (for certs not applicable put N/A):

	Cert number	Type	Expiration Date
EMT CERT:		☐State ☐National	
Paramedic Cert:		☐State ☐National	
	Date Issued	Certifying agency	
AZ FF I & II Cert:			

Professional certifications or licenses that relate to the position you are applying for: (use supplement page if necessary)

Type of cert or license	License number (if applicable)	Date received	Expiration date (if applicable)

List specialized training and/or schools:

_____

_____

_____

List equipment and/or computer applications you are proficient in operating:

_____

_____

_____

Applicant Last Name:_____

Work Experience
Begin with your most present or recent employer. List all jobs, paid or volunteer. List all jobs within the last 10 years.

Position title:	Employment Dates (mo/yr) To:		From:
Employer:		Phone #:	
Address:	City:	State:	Zip:
Direct Supervisor:			
Annual Salary:	Hours worked per week:		
Primary job duties:			
May we contact your present employer? ☐Yes ☐No			
Total Time worked: Years:	months:	Reason for leaving:	
Position title:	Employment Dates (mo/yr) To:		From:
Employer:		Phone #:	
Address:	City:	State:	Zip:
Direct Supervisor:			
Annual Salary:	Hours worked per week:		
Primary job duties:			
Total Time worked: Years:	months:	Reason for leaving:	
Position title:	Employment Dates (mo/yr) To:		From:
Employer:		Phone #:	
Address:	City:	State:	Zip:
Direct Supervisor:			
Annual Salary:	Hours worked per week:		
Primary job duties:			
Total Time worked: Years:	months:	Reason for leaving:	
Position title:	Employment Dates (mo/yr) To:		From:
Employer:		Phone #:	
Address:	City:	State:	Zip:
Direct Supervisor:			
Annual Salary:	Hours worked per week:		
Primary job duties:			
Total Time worked: Years:	months:	Reason for leaving:	

<u>If necessary, you may make additional copies of this sheet</u>

References			
Please list at least 3 professional references			
Name	**Address**	**Telephone**	**Years Known**

Disclaimer and Signature

Please read the following statements and carefully review your entire application before signing below

• By signing this application, I certify that all statements made on this form are true and complete to the best of my knowledge. I understand that, any omission, misstatement, or falsification may be cause for rejection of this application and/or discharge from Fire District employment.

• I understand that all documents requested and/or submitted, such as, but not limited to a cover letter, resume, certifications, and reference letters, are a part of the total application packet. Failure to submit all required documents shall cause my application to be eliminated from consideration.

• I also authorize the Corona De Tucson Fire District to make all necessary and appropriate investigations allowable by law to verify the information concerning my employment.

• I understand that any offer of employment will be conditional upon the results of a criminal background investigation, fingerprint clearance, and a Driver's License check.

• I understand that any offer of employment will be conditional upon the successful completion of a physical examination and a drug screening test.

• I understand that my employment is at will, that the terms and benefits provided to me do not constitute any contractual relationship between myself and the District, is for no definite period of time and is terminable by myself or the District with or without notice or cause. No oral statements or representations made either before or during employment can change or modify this non-contractual and at-will relationship.

• I understand that in consideration for my employment, I agree to comply with all federal, state and local laws, as well as District policies, procedures, rules/regulations and guidelines, which may be changed from time-to-time.

• I understand that it is my responsibility to keep the Fire District advised of any changes of address and/or phone number. I have read the above, understand its content and meaning, and agree to all of its provisions.

Applicant Name: _____

Applicant Signature: _____

Date: _____

It is the policy of the Corona De Tucson Fire District to provide equal employment opportunity without regard to race, color, religion, sex, national origin, age, disability, veteran status, sexual orientation, gender identity, or genetic information.

Supplemental questions

1. **Have you ever had any moving violations assessed against your driver's license in the last five years? ☐ Yes ☐ No**
2. **Have you ever been cited for driving under the influence of drugs or alcohol in the last five years? ☐ Yes ☐ No**
3. **Do you use or have you used within the last two, alcohol to the extent that it could impair your ability to safely function as a firefighter? ☐ Yes ☐ No**
4. **Do you use or have you used within the last two years, any illegal drugs or any prescription drugs without the supervision of a physician? ☐ Yes ☐ No**

If you answered yes to any of the questions above, please provide a brief explanation below.

Applicant Last Name:_____

Supplement information page

Use this page for any additional certifications or licenses

Applicant Last Name:_____

Applicant Checklist

- ☐ Complete and fully filled out employment application
- ☐ Birth certificate
- ☐ Copy of drivers license
- ☐ High school diploma or G.E.D copy
- ☐ C.P.R. card basic life support (previous healthcare provider)
- ☐ EMT/Paramedic certification copy
- ☐ Firefighter I & II certification copy
- ☐ Wildland certification copy
- ☐ Hazmat certification
- ☐ Any additional license or certifications
- ☐ If applicable DD214/Separation paperwork

Employment Applicant Information Release Waiver

I voluntarily and knowingly authorize, for employment purposes only, any present or past employer or supervisor, university or institution of learning, administrator, law enforcement agency, state agency, federal agency, credit bureau, private business, military branch or the National Personnel Records Center, the Bureau of Criminal Apprehension, personal reference, and/or other persons or organizations, to give record of information they may have concerning my criminal history, motor vehicle history, earnings history and employment records, general reputation, character, and any other information requested to Corona de Tucson Fire District and/or its agents or representatives. I understand that, if hired, my consent will apply throughout my employment with the Corona de Tucson Fire District.

Applicant Name: _____

Applicant Signature: _____ Date: _____