

# SPEEDWAY FIRE DEPARTMENT

1410 N Lynhurst Drive Speedway, IN 46224



## EMPLOYMENT APPLICATION

### APPLICANT INFORMATION

Full Name:						
	Last	First	M.I.			
Current Address:	Street Address (Including Apt/Unit #)			City, State		Zip Code
Phone:			E-mail:			
Are you a citizen of the United States?	YES	NO	Have you been convicted of a felony?	YES	NO	
Do you meet the age requirements described to be considered for employment as a Firefighter?				YES	NO	
Previous Address	Street Address (Including Apt/Unit #)			City, State		Zip Code
Previous Address	Street Address (Including Apt/Unit #)			City, State		Zip Code
Previous Address	Street Address (Including Apt/Unit #)			City, State		Zip Code

### LICENSES AND CERTIFICATIONS

Place a check by each license or certification you possess, and provide copies of certificates:

Driver's License:	State:	EMT:	Paramedic:	
Firefighter I:	Firefighter II:	Instructor:	CPR:	
Other (list): _____				

### PREVIOUS EMPLOYMENT

Company:			Phone:		
Full Address:				Supervisor:	
Job Title:			Starting Salary:	Ending Salary:	
Responsibilities:					
From:	To:	Reason for leaving:			
May we contact your previous supervisor for a reference?				Full Time	Part Time
Company:			Phone:		
Full Address:				Supervisor:	
Job Title:			Starting Salary:	Ending Salary:	
Responsibilities:					
From:	To:	Reason for leaving:			
May we contact your previous supervisor for a reference?				Full Time	Part Time

**MILITARY SERVICE**

Branch:	From:	To:
Rank at Discharge:	Type of Dishcharge:	
If other than honorable, explain:		

**EDUCATION**

High School:		Address:	
Years Completed:	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree:	
College:		Address:	
Years Completed:	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree:	
Other:		Address:	
Years Completed:	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree:	

**REFERENCES**

Please list three personal references.

Full Name:	Relationship:
Address:	Phone:
Email:	
Full Name:	Relationship:
Address:	Phone:
Email:	
Full Name:	Relationship:
Address:	Phone:
Email:	

**Court Records**

If you have ever been convicted, or have any charges pending, other than minor traffic violations, list details below. Use additional sheet if necessary.

Date:	Place (City, State):	Charge:
Date:	Place (City, State):	Charge:
Date:	Place (City, State):	Charge:

### ADDITIONAL INFORMATION

If you have ever worked (paid or volunteer) for any fire department, please answer the following questions. Space is provided for two departments. If additional space is needed, use blank paper and attach your responses to the application.

	Agency	Agency
Size of Department (# of employees)		
Paid or Volunteer?		
Length of time with department?		
Did you work unsupervised, with limited supervision, or with additional employees?		
List all courses and certifications obtained while at any fire or EMS service.		
List any other experiences; skills or qualifications that you feel are relevant to this position.		

### ESSAY QUESTION

<p><b>Please write (Do Not Type) your answer to the following two-part question. The answer should be at least 50 words long, legible and response to the question. Use additional paper if necessary.</b></p> <p>What qualities make you an outstanding fire fighter candidate?</p>	

### DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.  
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_