

## CADET FIREFIGHTER EMPLOYMENT APPLICATION

## **PLEASE SUBMIT WITH APPLICATION:**

- 1. Valid driver's license
- 2. High school diploma or equivalent
- 3. Any relevant training/educational certification
- 4. Résumé



## Montgomery County ESD 6 Porter Fire Department

## **Cadet Firefighter Employment Application**

		Appli	cant	Informat	ion			
Full Name:							Date:	
	Last	First				M.I.		
Address:	Street Address						Apartment/Un	it #
	City					State	ZIP Code	
Phone:			E	mail:				
Birth I	Date:					Driver Licens	se #:	
Position App	olied for:							
Are you a ci	tizen of the United States?	YES		lave you re years .?	eceived	l a moving viola	tion in the last YES	_
Have you pa the last 12 n	articipated in illegal drug use in nonths?	YES	NO	If yes, w	hen?			
•	ver plead "guilty", "no contest", ed or been convicted of a	YES	NO					
lf yes, expla	in:							
			Edu	cation				
High School	l:	Ad	ddress	:				
From:	To: D	id you gra	duate′	YES	NO	Diploma:		
College:		Ad	ddress	: <u> </u>				
From:	To: D	id you gra	duate′	YES	NO	Degree:		
Other:		Ac	ddress	:				

From:	To: Did y	ou graduate?	, [		egree:	
		Refer	ences			
Please list t	hree professional references.					
Full Name:					Relationship:	
Campany						
Address:						
					Relationship:	
Company:						
Address:						
Full Name:					Relationship:	
Company:						
Address:						
	_	Previous E	mploym	ent	_	
Company:					Phone:	
Address:						
Job Title:						
Responsibil	ties:					
From:	To:		Reason	for Leavin	g:	
Mav we con	tact your previous supervisor for a	reference?	YES	NO		
	,					
Company:						
Address:					Supervisor:	
Job Title:		_ Starting S	Salary: <u>\$</u>		Ending Salary:	
Responsibil	ties:					
From:	To:				g:	
May we con	tact your previous supervisor for a	reference?	YES	NO		
, 11 10	, , = =================================					
Company:					Phone:	
Address:					Supervisor:	

Job Title:	Starting Salary: <u>\$</u>	Ending Salary: <u>\$</u>	
Responsibilities:			
From: To:		_eaving:	
May we contact your previous supervisor for a refer	YES rence?	NO   □	
	Military Service		
Branch:		From: To:	
Rank at Discharge:	Type of Dis	scharge:	
If other than honorable, explain:			
Persor	nal History Stateme	ent	
Tell us about yourself and why you	want to pursue a care	er as a professional firefighter.	

<u>Disclaimer and Signature</u>
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 immediate disqualification.
Signature: Date: