City of Grass Valley/Nevada County Consolidated Fire District

JOA (City/District) Employment Application

EQUAL OPPORTUNITY EMPLOYERS

(Type or print clearly in ink; a separate application is required for each position)

POSITION APPLYING FOR:_____ DATE: _____

NAME: Last_____First_____Middle_____

PRESENT ADDRESS_____City_____

STATE_____ZIP_____email address_____

PHONE: Home_____Work_____Other_____

If you have worked under a different name, what was your former name and with what employer?

_____

Are you of the legal age to work? ☐ YES ☐ NO

If hired, can you produce documentation of U.S. Citizenship or Legal Work Permits to comply with the Immigration & Naturalization Act? ☐ YES ☐ NO

Other than minor traffic offenses, have you been convicted of any crime, either felony or misdemeanor, or are you now under charges for any offense against the law? (A "yes" answer does not automatically disqualify you.)
☐ YES ☐ NO If yes, please explain when, where & disposition of case:_____

_____

In the last ten (10) years have you been discharged or forced to resign from employment for misconduct or cause? ☐ YES ☐ NO
If yes, identify all such employers, dates & reasons:_____

_____

Can you perform the essential job functions of this position with/without accommodations? ☐ YES ☐ NO

Do you have any relatives employed by the City or District? ☐ YES ☐ NO
If yes, give name and relationship:_____

When are available to begin work? ____/____/____ Are you on a layoff and subject to recall? ☐ YES ☐ NO

California Driver's License No._____Class_____Exp. Date_____

PLEASE RETURN COMPLETED APPLICATIONS TO:

11329
GRASS

NEVADA COUNTY CONSOLIDATED FIRE DISTRICT
McCOURTNEY ROAD
VALLEY, CA 95949

Questions, please call (530) 273-3158

Education

Did you graduate from High School? ☐ Yes ☐ No **If NO, do you have a G.E.D. certificate?** ☐ Yes ☐ No

SCHOOL	NAME OF SCHOOL CITY & STATE	COURSE OF STUDY	MAJOR	DID YOU GRADUATE	DIPLOMA OR DEGREE
JUNIOR COLLEGE					
COLLEGE					
OTHER					

Work Experience

Beginning with present or most recent experience, account for all employment during the last ten (10) years. If you have additional employers or wish to elaborate on your experience, supplemental sheets must be attached. List all military service and relevant volunteer work, if applicable. A resume will not substitute for a completed application.

Employer Name_____ Address_____ City_____ State_____Zip_____ Phone_____ Last Salary_____	From Mo/Yr ___ /___ To Mo/Yr ___ /___ Full Time ☐ Part Time ☐ Volunteer ☐ Hours/Week_____	Job Title_____ Duties_____ _____ Reason for leaving_____ _____ Supervisor_____
Employer Name_____ Address_____ City_____ State_____Zip_____ Phone_____ Last Salary_____	From Mo/Yr ___ /___ To Mo/Yr ___ /___ Full Time ☐ Part Time ☐ Volunteer ☐ Hours/Week_____	Job Title_____ Duties_____ _____ Reason for leaving_____ _____ Supervisor_____
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References

Job Related References

Name, Address, Position	Business, Relationship	Phone

Personal References (NOT former employers or relatives)

Name	Address	Phone

Which employers would you prefer the City/District not contact?_____

Reason?_____

Additional Information

1. Write a brief statement as to why you would like to work for the City/District.

_____

_____

_____

_____

_____

_____

_____

2. Are there any other experiences, skills, or qualifications which will be of special benefit in the job for which you are applying? (Certificates, Special Training, etc.) You may omit items which would indicate your race, religion, color, national origin, ancestry, sex, age, and medical condition, physical or mental disability.

_____

_____

_____

_____

_____

_____

_____

Certifications

☐	**Title 22 First Aid**	**Expiration Date:** _____
☐	**C.P.R. Card**	**Expiration Date:** _____
☐	**EMT Basic**	**Expiration Date:** _____
☐	**EMT Intermediate**	**Expiration Date:** _____
☐	**Paramedic**	**Certification Date:** _____
☐	**SFM FF1 Academy**	**Certification Date:**
	Location _____	_____
☐	**CASFM Volunteer Firefighter**	**Certification Date:** _____
☐	**CASFM Firefighter 1**	**Certification Date:** _____
☐	**Basic Wildland Firefighting Class**	**Certification Date:** _____
☐	**Confined Space Awareness**	**Certification Date:** _____
☐	**HazMat FRO**	**Certification Date:** _____
☐	**Swift Water Rescue**	**Certification Date:** _____
☐	**Driver / Operator 1A/1B**	**Certification Date:** _____

Other (Please explain):

_____
_____
_____
_____
_____
_____
_____
_____

ATTACH COPIES OF CERTIFICATES/CARDS

CERTIFICATION OF APPLICANT
PLEASE READ CAREFULLY AND SIGN BELOW

Incomplete or illegible applications will not be processed.

I hereby certify that all statements made on or in connection with this application, including those regarding my training and experience, are true and complete to the best of my knowledge and belief, and I understand that any misstatements or omissions of material fact herein are cause for disqualification or dismissal from the City/District.

I am aware that if I am the successful candidate, I may be required to undergo a medical examination, financial and personal background investigation, and reference check before formal appointment. I understand that formal appointment is conditional upon successfully completing these final checks, and that any preliminary job offer may be withdrawn based on the results of these final checks.

I authorize the employers, educational institutions and references listed to give you any information concerning my previous employment, education and any pertinent information they may have. I release said organizations, and persons from liability for any damages resulting from a good faith response to any inquiry I have authorized.

Applicant's Signature:_____ Date:_____