



Jefferson County Fire & EMS

765 S. 5th St. St.
Madras, OR 97741
Phone: 541-475-7274

Employment Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ DPSST #: _____

Position Applying for: _____

If Hired are you able to present documentation sufficient to establish work authorization in the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO In accordance with ORS 659A.360

If yes, explain: _____

Do you have a valid Driver's license? YES NO
License # &
Exp. Date: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address or Email: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address or Email: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address or Email: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Pertinent Credentials

Credentials: _____ Exp: _____

Credentials: _____ Exp: _____

Credentials: _____ Exp: _____

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. By my signature, I authorize Jefferson County Fire & EMS District to investigate all statements in the application and to conduct a background and driving record check.

Signature: _____ Date: _____

For Official Use Only

	Accepted	Rejected	Date	Signature	Title
Applicant					
Hire Date					
Probation					
Full					
Honorary					
Reserve					
Resignation					