



Employment Application

Applicant Information

Full Name: Last First M.I.			Date:		
Are you 18 years or Older? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Address: Street Address				Apartment/Unit #	
City				State	ZIP Code
Phone: ()		Alt Phone: ()		E-mail Address:	
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>			If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Do you currently possess a valid Arizona Drivers License? YES <input type="checkbox"/> NO <input type="checkbox"/>					

Desired Employment

Position Applied for:		Date Available:		Desired Salary: \$	
Are you employed now? YES <input type="checkbox"/> NO <input type="checkbox"/>		If so, may we contact your current employer? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever applied to this company before? YES <input type="checkbox"/> NO <input type="checkbox"/>		If yes, when?		Where?	
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/>		If yes, when?		Where?	
Reason for leaving?					
Name of last supervisor at this company:					
Who referred you to this company? <input type="checkbox"/> Employment Agency <input type="checkbox"/> Newspaper Advertising <input type="checkbox"/> Friend					
<input type="checkbox"/> State Employment Office <input type="checkbox"/> College Placement Service <input type="checkbox"/> Walk In <input type="checkbox"/> Other					

Education

High School or GED:		Address:			
		Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree Obtained:	
College:		Address:			
From: To:		Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree Obtained:	
Other:		Address:			
From: To:		Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree Obtained:	

General

Subjects of Special Study or Research Work					
Special Training					
Special Skills					

References

Below, give the names of three professional references, whom you have known at least one year. Do not list relatives.

Full Name:	Years Acquainted
Company:	Phone: ()
Address:	

Full Name:	Years Acquainted
Company:	Phone: ()
Address:	

Full Name:	Years Acquainted:
Company:	Phone: ()
Address:	

Service Record

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

Criminal Background

Have you ever been convicted of any misdemeanors?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If yes, please provide date(s) and explain:		
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If yes, please provide date(s) and explain:		
Are there any criminal charges currently pending against you?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If yes, state the nature of the charges and current status. This does not include civil traffic cases.		

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.

I also understand that Golder Ranch Fire District, being an at-will employer, may terminate my employment at any time, with or without cause and without liability, and that my employment does not constitute a contract of employment between myself and the District. I will comply with and be governed by all federal and/or state laws, and District policies, rules, and procedures as may be in effect.

Signature:	Date:
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