



Spring Lake Fire Department

Application for Employment *An Equal Opportunity Employer*

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion or national origin.

Today's Date: _____

PERSONAL INFORMATION:

Last Name: _____ First Name: _____ MI: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Are you 18 years old or older? Yes No

Are you eligible to work in the U.S.? Yes No

Have you applied to the fire department before? Yes No When? _____

Do you have a valid Michigan Driver's License? Yes No

Driver's License Number: _____

Have you had any accidents during the last three years? Yes No

Have you had any moving violations during the past three years? Yes No

Is there any Civil or Criminal action of any kind pending against you? Yes No

Have you ever been arrested? (Criminal and/or traffic arrests) Yes No

If so, where, when, what for and what was the disposition in each case?

Are you related to any current or past employees of the fire department or Spring Lake Township?

Yes No Who? _____ Relationship _____

Referred by: 1.) _____ 2.) _____

EDUCATION:

SCHOOL	NAME/LOCATION OF SCHOOL	NO. YRS. COMPLETED	DID YOU GRADUATE?	MAJOR/DEGREE
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade, Business or Other School			<input type="checkbox"/> Yes <input type="checkbox"/> No	

List any computer software you are proficient with (i.e. Firehouse, Word, Excel, Access, PowerPoint, BSA, GIS):

List any special skills, licenses, certifications, or knowledge applicable to the position you are seeking:

EMPLOYMENT HISTORY: *List last four employers, starting with most recent*

Employer:		Date Started:	Date Left:	Reason for Leaving:
Address:		Starting Pay:	Ending Pay:	
City:	State/Zip:	Supervisor:	Phone:	
Job Title(s):				
Your job responsibilities:				

Employer:		Date Started:	Date Left:	Reason for Leaving:
Address:		Starting Pay:	Ending Pay:	
City:	State/Zip:	Supervisor:	Phone:	
Job Title(s):				
Your job responsibilities:				

Employer:		Date Started:	Date Left:	Reason for Leaving:
Address:		Starting Pay:	Ending Pay:	
City:	State/Zip:	Supervisor:	Phone:	
Job Title(s):				
Your job responsibilities:				

Employer:		Date Started:	Date Left:	Reason for Leaving:
Address:		Starting Pay:	Ending Pay:	
City:	State/Zip:	Supervisor:	Phone:	
Job Title(s):				
Your job responsibilities:				

Have you ever been fired, dismissed, asked to resign, resigned by mutual agreement, or otherwise been terminated from any job? Yes No If yes, what job and why?

REFERENCES: *Provide three work related references, not related to you.*

NAME	ADDRESS	PHONE #	YEARS AQUAINTED / RELATIONSHIP

What prompts you to make this application for employment with our department? _____

I have applied for a position with the Spring Lake Fire Department and hereby authorize my former employer(s) and any other given references to provide any information they may have regarding me, whether or not it is in their records. I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal.

Signature of Applicant: _____ Date: _____