

NORTH KITSAP ***FIRE & RESCUE***

APPLICATION FOR EMPLOYMENT

| | | |
|--|----------------------------|----|
| Position Applied For: | Date of Application: | |
| Name of Applicant (First, Middle, Last): | | |
| Mailing Address: | | |
| Physical Address: (If different than mailing): | | |
| How long at present address: | Message/Cell Phone Number: | |
| E-mail: | | |
| How did you learn about this position? (If by employee referral, please specify name) | | |
| | | |
| BACKGROUND | | |
| Applicants must be 18 years of age at the time of application. | | |
| Are you at least 18 years of age? | Yes | No |
| Do you have a valid Driver License? | Yes | No |

| CERTIFICATIONS: List any certifications relevant to the position for which you are applying. (Attach additional pages if necessary) | | | |
|--|--------|----------------------|-----------------|
| Certification | Agency | Certification Number | Expiration Date |
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North Kitsap Fire & Rescue is an equal opportunity employer. Qualified applicants receive consideration for employment without discrimination of race, color, religion, creed, gender, sexual orientation, national origin, ancestry, age, disability, marital status, honorably discharged veteran or military status, genetic information, or any other legally protected classification. Contact Katie Patti, Director of Administrative Services aphr@nkfr.org for accommodation requests.

WORK EXPERIENCE

Paid Volunteer May we contact this employer? Yes No Please notify me first

| | | | |
|-------------------|-----------------|------------------|--------------|
| From (Mo. & Year) | Employer's Name | Type of Business | Phone Number |
| To (Mo. & Year) | Address | City | State & Zip |

Your Most Recent Position:

Primary Duties:

Name & Title of Immediate Supervisor:

Reason For Leaving or Considering Change:

Paid Volunteer May we contact this employer? Yes No Please notify me first

| | | | |
|-------------------|-----------------|------------------|--------------|
| From (Mo. & Year) | Employer's Name | Type of Business | Phone Number |
| To (Mo. & Year) | Address | City | State & Zip |

Your Most Recent Position:

Primary Duties:

Name & Title of Immediate Supervisor:

Reason For Leaving or Considering Change:

Paid Volunteer May we contact this employer? Yes No Please notify me first

| | | | |
|-------------------|-----------------|------------------|--------------|
| From (Mo. & Year) | Employer's Name | Type of Business | Phone Number |
| To (Mo. & Year) | Address | City | State & Zip |

Your Most Recent Position:

Primary Duties:

Name & Title of Immediate Supervisor:

Reason For Leaving or Considering Change:

| WORK EXPERIENCE Continued | | | |
|--|-----------------|--|--------------|
| <input type="checkbox"/> Paid <input type="checkbox"/> Volunteer | | May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Please notify me first | |
| From (Mo. & Year) | Employer's Name | Type of Business | Phone Number |
| To (Mo. & Year) | Address | City | State & Zip |
| Your Most Recent Position: | | | |
| Primary Duties: | | | |
| Name & Title of Immediate Supervisor: | | | |
| Reason For Leaving or Considering Change: | | | |

| | | | |
|--|-----------------|--|--------------|
| <input type="checkbox"/> Paid <input type="checkbox"/> Volunteer | | May we contact this employer? Yes No Please notify me first | |
| From (Mo. & Year) | Employer's Name | Type of Business | Phone Number |
| To (Mo. & Year) | Address | City | State & Zip |
| Your Most Recent Position: | | | |
| Primary Duties: | | | |
| Name & Title of Immediate Supervisor: | | | |
| Reason For Leaving or Considering Change: | | | |

| | | | |
|--|-----------------|--|--------------|
| <input type="checkbox"/> Paid <input type="checkbox"/> Volunteer | | May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Please notify me first | |
| From (Mo. & Year) | Employer's Name | Type of Business | Phone Number |
| To (Mo. & Year) | Address | City | State & Zip |
| Your Most Recent Position: | | | |
| Primary Duties: | | | |
| Name & Title of Immediate Supervisor: | | | |
| Reason For Leaving or Considering Change: | | | |

| EDUCATION | High School | College/University | Graduate or Professional |
|---|--------------------|---------------------------|---------------------------------|
| School Name: | | | |
| Diploma or Degree (list degree received): | | | |
| Course of study: | | | |
| Briefly describe any specialized training, skills, licenses, etc. | | | |

If not a high school graduate, do you have a certificate of equivalence? (GED) Yes No
If yes, date received certificate: _____

MILITARY RECORD (Have you ever served in the Armed Forces?) If so, please answer the following:

Your current military status? Active Retired Reserve National Guard

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|--------------------|---------------------------------|
| Branch of Service: | Highest rank attained: |
| Type of discharge: | Date and location of discharge: |

List any disciplinary action taken against you while in the military:

REFERENCES: Please provide names of four individuals other than former employers and relatives who have known you for at least three (3) years and who have knowledge of your character, experience, and abilities.

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|-----------|-------------------|------------------------|
| 1. | Name: | Number of years known: |
| | City, State, Zip: | Phone number: |
| 2. | Name: | Number of years known: |
| | City, State, Zip: | Phone number: |
| 3. | Name: | Number of years known: |
| | City, State, Zip: | Phone number: |
| 4. | Name: | Number of years known: |
| | City, State, Zip: | Phone number: |

