



***Pelham Batesville Fire Department
Membership /Employment Application***

Position Applied For:		Date of Application		
Name		Phone		
Address		Social Security #		
City, State, Zip				
Full Time _____ Volunteer _____		Sex: M _____ F _____	Date of Birth	
Drivers License #	State:	Class:	Are you a US Citizen: Y _____ N _____	
Have you ever been convicted of a felony? Y _____ N _____ If so, please explain.				
Currently enlisted in US Military: Y _____ N _____		Status: Active- Inactive- Reserves-		
Do you wear corrective lenses?		Yes _____	No _____	
Are You currently employeed?		Yes _____	No _____	
Are you a member of another Department?		Yes _____	No _____	
If so, which Dept.				
Current Position:		How Long?		
If you are applying for Volunteer status please indicate times you will be available:				
Education				
School	Name and address	Course of study	Date Completed	Diploma Degree
High School				
College				
Professional Graduate				
Other				

Describe any specialized training, apprenticeships or skills

Describe any job related training received in the US Military

Additional information

Other qualifications

Personal/Professional References

Do not include family members or past supervisors

Name:	Phone Number	Best time to call	Occupation

Note to applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accomodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

YES

NO

Work Experience

Start with your present or last place of employment. Include any job related Military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	From	To	May we contact	
Address			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Address	Work Duties			
Supervisor				
Telephone #				
Reason for leaving				
Employer	From	To	May we contact	
Address			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Address	Work Duties			
Supervisor				
Telephone #				
Reason for leaving				
Employer	From	To	May we contact	
Address			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Address	Work Duties			
Supervisor				
Telephone #				
Reason for leaving				
Employer	From	To	May we contact	
Address			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Address	Work Duties			
Supervisor				
Telephone #				
Reason for leaving				

I certify that the information contained in this application is true and correct. The Pelham-Batesville Fire Department has my permission to investigate my past employment and related personal history for employment considerations. It is understood that if offered a position, I will be required to go through physical evaluation, a medical exam, and drug testing. A position with the Department will be contingent upon the results of the above testing. I further understand that false statements or omissions may be cause for rejection of my application.

Applicant Signature: _____ Date: _____