



Jefferson-Como Fire Protection District

Name: _____
 First Middle Last

Mailing Address: _____
 P.O. Box/Street City State Zip Code

Phone: _____ Email: _____

Are you 18 years or older? ___Yes___No

Position Applied for: _____ Social Security # _____

If offered a position here, when would you be available? _____

Are you employed now? ___Yes___No If so, may we contact present employer? _____

How did you hear about Jefferson-Como Fire Protection District?

Education

School Level	Name & Location	Years Attended	Diploma/Degree
High School			
College			
Trade Schools/Other			

Certifications/Special Skills/Volunteering Experience (Attach all copies of National, State, and Educational Certifications)

Please list certifications, special skills or volunteering experience as they relate to the position for which you are applying.

Current Certificates:

Special Training/Previous Certifications:

Volunteer Experience: _____

Driving (Attach a copy of your Driver License)

Do you possess a valid Colorado Driver's License _____ Yes _____ No. If not Colorado, which state? _____

What class of license do you hold? _____

Have you had your driver's license suspended or revoked in the last 3 years? _____ Yes _____ No. If yes, give details: _____

Have you ever been convicted of any law violation/felony? _____ Yes _____ No. If yes, give details: _____

The successful candidate will be required to pass a drug test, background and credit investigations.

References (Give three references not related to you or former employers.)

Name	Phone	Business	Years Acquainted
1.			
Address			
2.			
Address			
3.			
Address			

Former Employers (List below the last three employers starting with the most recent.)

Employer Name		Phone	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities:			
From:	To:	Reason for Leaving:	
May we contact your supervisor? _____ Yes _____ No			

Employer Name		Phone	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities:			
From:	To:	Reason for Leaving:	
May we contact your supervisor? _____ Yes _____ No			

Employer Name		Phone	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities:			
From:	To:	Reason for Leaving:	
May we contact your supervisor? _____ Yes _____ No			

Affidavit, Consent and Release (Please read each statement carefully before signing.)

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand that this application, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time. Only the Board of Directors of the Jefferson-Como Fire Protection District has the authority to enter into an agreement of employment for any specified period and such agreement must be in writing, signed by a Board member and employee. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without reason and with or without notice. I have read, understand and by my signature consent to these statements.

Signature

Print Name

Date _____

Jefferson-Como Fire Protection District
P.O. Box 380
Como, CO 80432
719-836-2082
www.jcfpd.org

An Equal Opportunity Employer