

Little Sioux Fire Department Application

Name:	
Address:	
City:	State:
Telephone:	e-mail address:
SSN:	Drivers License Number:
Education	
Highest Level of Education 9 10 11 12 GED College: 1 2 3 4	
High School:	
Address:	City: ST:
College:	
Degree:	Course of Study:
Address:	City ST:
CPR Certified: YES NO EMS Certified: YES NO	
Level: EMR EMT AEMT Paramedic Certification Num.:	
Fire Fighter Certified: YES NO Level: I II III	
Special Training: _____ _____ _____	
Do you have any experience, licenses, or certificates not listed before which relate to position being applied for? _____ _____ _____	
List References	Non-family only please
Name: _____	Name: _____
Address: _____	Address: _____
City: _____ ST: _____	City: _____ ST: _____
Phone: _____	Phone: _____
Other Activities: _____ _____ _____	

Have you ever been convicted of a felony? YES NO A conviction does not automatically mean you that you cannot be appointed. (What you were convicted of and how long ago are important.) Please give all facts so that a decision can be made. _____

All statements made on this application are true and correct. I understand that intentional false statements on this application will eliminate me from further consideration of appointment or will be grounds for dismissal. I authorize the City of Little Sioux to conduct or participate in an investigation of my personal background, educational credentials, and police record as be necessary to verify the information provided in this application and to determine my fitness to hold the position for which I have applied. No promise of appointment is made, only authorized City personnel can extend an offer of appointment.

As terms of appoint, I will attend meetings, classes and work nights as set forth by Little Sioux Fire Department. I will also obtain certifications necessary to fulfill the requirements set forth by the State of Iowa, City of Little Sioux and the Little Sioux Fire Department

Signature

Date

For Department Use Only:

_____ Approved _____ Denied

Chief of Department: _____

Date: ____/____/____