

Ripon Consolidated Fire District

142 S. Stockton Avenue

Ripon, Ca 95366

209-599-4209 Fax# 209-599-2847

Application for Reserve Firefighter

Full Name: _____ Date: _____

Home Address: _____

Home Phone: _____ Business/Cell Phone: _____

Driver's License No.: _____ Expires: _____

****DMV Print Out Required Application Incomplete with out DMV Print Out**

Class: _____ Endorsements: _____

Are you a citizen of the United States? Yes: _____ No: _____
Are you between the ages of 21 and 65? Yes: _____ No: _____

EDUCATION:

List the highest grade completed: _____

Name of College Attended Units	From	To	Major
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other pertinent education background or information: _____

List certificates or certifications you currently hold with expiration dates: _____

WORK EXPERIENCE: (start with the most recent position)

Employer	From	To	Position	Duties
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PERSONAL INFORMATION:

Have you ever been convicted, served a jail sentence or been placed on probation after committing a felony or misdemeanor? Yes____ No____
If yes, explain:_____

Will you submit to a fingerprint and background check? Yes____ No____
Will you submit to a drug-screening test? Yes____ No____

Do you have any known physical or mental conditions that could preclude you from the duties, as you understand them, required for the position you are applying? Yes____ No____ If yes, explain:_____

List three persons, excluding immediate family members, willing to provide character references for you.

Name	Relationship to you	Phone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other information you would like us to know about you and your qualifications for this position:_____

RESERVE FIREFIGHTER APPLICATION DISCLAIMER AND ACKNOWLEDGEMENT

I hereby authorize representatives of the Ripon Consolidated Fire District to contact organizations and individuals listed on this application for the purpose of establishing or verifying my qualifications, work history and work habits. I understand and acknowledge that such information will be used confidentially and for the purpose of employment decision only.

Yes: _____ No: _____

PLEASE READ BEFORE SIGNING. I certify that the statements made by me in this application are true, complete and correct to the best of my knowledge and belief. I understand that statements made are subject to verification and that any misrepresentation, fraud or omission of material facts may result in denial of employment or used for disciplinary action, including dismissal, after employment.

(Signature of Applicant)

(Date)