LIVERPOOL FIRE DEPARTMENT, INC.

1110 Oswego Street * Liverpool, NY 13088 * (315) 457-6347 * Fax (315) 457-8051

Date:_____

Name:_____
(Last, First, MI)

Address:_____
(Full Address)

Telephone Number: (_____) _____ Cell Home

Email:_____

Date of Birth: ____ / ____ / _____ Are you 21 years of age or older? Yes No

Do you have a valid NYS drivers license? Yes No Drivers license # _____

Are you a NYS EMT-B or higher? Yes No

Do you have a High School Diploma or GED? Yes No

Have you ever been convicted of a felony, misdemeanor, insurance fraud, arson, or a reduction of one of these offenses? Yes No

If yes explain:_____

_____

Education:

High School:_____ Years attended:_____ Graduate?_____

Trade School: _____ Years attended:_____Graduated?_____

Collage:_____ Years attended: _____ Graduated?_____

Special Skills(List any skills or experience that you feel would help you in the position)

_____

_____

_____

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References: (Please list three professional references not related to you)

Name	Address	Phone	Relationship

Work History:

Job Title:	Start:	End:
Company Name:		
Supervisor Name:		
Duties:		

Job Title:	Start:	End:
Company Name:		
Supervisor Name:		
Duties:		

**Liverpool Fire Department is an equal opportunity employer. We are dedicated to a policy of nondiscrimination in employment. Employment is available without regard to race, color, religion, creed, gender, national origin, age, disability, martial or veteran status, sexual orientation or other legally protected status.*

I certify that the facts set forth in this application for employment are true and compete to the best of my knowledge. I understand that if I am employed, false statements, omissions, or misrepresentations may result in my dismissal. I authorize the Liverpool Fire Department to make an investigation of any of the facts set forth in this application.

I acknowledge and understand that the Liverpool Fire Department is an “at will” employer. Therefore, any employee may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

_____ _____

Signature Date