



**MINOOKA FIRE PROTECTION DISTRICT
PART-TIME APPLICATION**

1. **Name** _____
Last First Middle

2. **Previous names (Maiden Name) you have had:**

3. **Address** _____
Street Address Apartment/Unit#

_____ *City State Zip Code*

4. **Home Phone** _____ **Business Phone** _____
Area Code Area Code

5. **Email Address** _____

6. **Driver's License State** _____ **Driver's License No.** _____ **Class** _____

7. **Date of Birth** _____ **Social Security Number** _____

8. **Are you a citizen of the United States?** Yes _____ No _____

If no, are you an alien with evidence of intention to become a U.S. Citizen? Yes _____ No _____

9. **List all former addresses for the past ten years in chronological order:**

Address _____
Street Address Apartment/Unit#

_____ *City State Zip Code*

Address _____
Street Address Apartment/Unit#

_____ *City State Zip Code*

Address _____
Street Address Apartment/Unit#

_____ *City State Zip Code*

Address _____
Street Address Apartment/Unit#

_____ *City State Zip Code*

EDUCATION

10. **Circle Highest Grade Completed:**

GED Certificate *High School* *College 1 2 3 4*
Graduate School *M.A.* *Ph.D.* *Other*

Name/Address of School Date(s) Attended Graduate (Yes or No)

11. **List course work relevant to position for which you have applied _____**

MILITARY

12. **Are you now or have you ever been in the military service? Yes _____ No _____**

13. **Branch of service _____**

14. **Are you now or were you ever an active member of any branch of the U.S. Military Reserve Forces or National Guard Unit? Yes _____ No _____**

Rank _____

Unit _____ *From* _____ *To* _____

CONVICTION HISTORY

15. **Have you ever been convicted of a crime other than minor traffic violations? Yes ___ No ___**

If "Yes," explain below:

DATE	POLICE AGENCY	OFFENSE	DISPOSITION OF CASE

16. List all traffic convictions and accidents you have had in the last four years. (If more room is needed, please type on a separate page and attach).

LOCATION (City-State)	APPROXIMATE DATE	VIOLATION	DISPOSITION

EMPLOYMENT HISTORY

List all jobs you have had for the last ten years. Include periods of unemployment. Put your present job first. Include military service in proper time sequence along with temporary or part-time jobs.

17. Employer's name _____ Phone _____
Area Code

Address _____
Street Address Unit/Suite #

_____ City State Zip Code

Employed _____ to _____ Salary _____ Per _____
Month-Year Month-Year

Job Description _____

May we contact them? _____

18. Employer's name _____ Phone _____
Area Code

Address _____
Street Address Unit/Suite #

_____ City State Zip Code

Employed _____ to _____ Salary _____ Per _____
Month-Year Month-Year

Job Description _____

May we contact them? _____

19. Employer's name _____ Phone _____
Area Code

Address _____
Street Address Unit/Suite #

City State Zip Code

Employed _____ to _____ Salary _____ Per _____
Month-Year Month-Year

Job Description _____

May we contact them? _____

20. Employer's name _____ Phone _____
Area Code

Address _____
Street Address Unit/Suite #

City State Zip Code

Employed _____ to _____ Salary _____ Per _____
Month-Year Month-Year

Job Description _____

May we contact them? _____

21. Employer's name _____ Phone _____
Area Code

Address _____
Street Address Unit/Suite #

City State Zip Code

Employed _____ to _____ Salary _____ Per _____
Month-Year Month-Year

Job Description _____

May we contact them? _____

22. **Have you ever been suspended or terminated, other than from an economic layoff, from any prior employment?** Yes _____ No _____

If yes, please explain:

23. **Have you ever resigned from any employment position because of misconduct or unsatisfactory performance or while under investigation?** Yes _____ No _____

If yes, explain:

REFERENCES

Please list three adults not related to you and not former employers, who have known you for more than three years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality, and other qualities.

24. **Name** _____ **Address** _____
Home Phone _____ **Business Phone** _____
Occupation _____ **Relationship** _____

25. **Name** _____ **Address** _____
Home Phone _____ **Business Phone** _____
Occupation _____ **Relationship** _____

26. **Name** _____ **Address** _____
Home Phone _____ **Business Phone** _____
Occupation _____ **Relationship** _____

27. **Please review the enclosed job description for the position for which you are applying and state whether you can perform the essential job functions listed therein with or without reasonable accommodation.** Yes _____ No _____

28. **If accommodation is needed, please explain:** _____

29. **Person(s) to be notified in case of emergency.**

Name _____ Address _____

Phone _____ Relationship _____

Name _____ Address _____

Phone _____ Relationship _____

SUBMISSION OF DOCUMENTATION AND CREDENTIALS

30. **I understand that if given a conditional offer I will be fingerprinted, and a set of my fingerprints will be furnished to the Illinois Department of State Police and to the Federal Bureau of Investigation.**

DOCUMENTATION

TIME OF SUBMISSION

Minooka Fire Protection District Authorization Form

With this application

Copy of High School or GED diploma
(Do not send college certificates as substitutes)

With this application

Valid driver's license

With this application

ONE (1) of the following:

With this application

- Birth certificate issued by the State Department, Form FS-545
- Birth certificate issued abroad by the State Department, Form DS-1350
- Original or certified copy of a birth certificate issued by a state, county, or municipal authority, bearing a seal
- Native American tribal documents
- U.S. citizen identification card, INS Form 1-197
- Identification card for use of a resident citizen in the U.S., INS Form 1-179

I HEREBY CERTIFY THAT I HAVE READ THE ABOVE QUESTIONS AND STATEMENTS, AND I CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THIS QUESTIONNAIRE, AND THAT ALL MY ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MISREPRESENTATIONS, OMISSIONS OR FALSIFICATIONS ON THIS QUESTIONNAIRE OR AT ANY TIME DURING THE HIRING PROCESS MAY RESULT IN MY APPLICATION NO LONGER BEING CONSIDERED OR IN TERMINATION OF MY EMPLOYMENT WITH MINOOKA FIRE PROTECTION DISTRICT.

Dated at _____ Illinois, this _____ day of _____, 20____

Signature in Full _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age, or physical or mental handicap. All information provided in this application will be treated confidentially, and will be used only to help assure the best use of your abilities if you are employed with us.

**MINOOKA FIRE PROTECTION DISTRICT
AUTHORIZATION FORM**

I, (print name) _____, hereby authorize the MINOOKA FIRE PROTECTION DISTRICT and its agents, employees or representatives to obtain and use all information relating to my previous and current employment, education, military record, criminal conviction history, personal characteristics and all other information which may bear favorably or unfavorably upon my application for employment made to the MINOOKA FIRE PROTECTION DISTRICT. I also consent to the release to the MINOOKA FIRE PROTECTION DISTRICT of any and all medical records prepared during the physical examination I am required to undergo for employment with the MINOOKA FIRE PROTECTION DISTRICT. I further release from liability any person or persons providing or receiving any such information in connection with this pre-employment investigation.

I also agree to indemnify and hold harmless the MINOOKA FIRE PROTECTION DISTRICT, the Board of Fire Commissioners of the MINOOKA FIRE PROTECTION DISTRICT, the individual trustees and commissioners, employees and agents against any claim or loss whatsoever, including but not limited to attorneys' fees and any cost of defense which arises directly or indirectly out of application process. I also covenant that for the consideration of my application, I agree not to sue the MINOOKA FIRE PROTECTION DISTRICT, the individual trustees and commissioners, employees and agents for any injury, loss or damage as a result of such process including but not limited to court costs, attorneys' fees and interest, in any manner caused directly or indirectly, including the negligent acts or omissions of the MINOOKA FIRE PROTECTION DISTRICT, its trustees and commissioners as well as its employees and agents.

I hereby acknowledge and agree that as a condition of employment with the MINOOKA FIRE PROTECTION DISTRICT, I must maintain at all times a valid State of Illinois Driver's License, of the Class required to operate all vehicles of the MINOOKA FIRE PROTECTION DISTRICT. I do further agree that my failure to maintain said drivers license will constitute reason for withdrawal of a conditional offer of hire or just cause for my dismissal from employment with the District.

I hereby acknowledge and agree that should I fail to complete required basic training, orientation, etc. that is required of me by the MINOOKA FIRE PROTECTION DISTRICT, as an employee, that I will reimburse the Minooka Fire Protection District all costs related to my application, medical physical and educational courses within one year of my termination.

Signature _____

MUST BE NOTORIZED:

SUBSCRIBED and SWORN to
before me this _____ day of
_____, 20__.

Notary Public