



PLEASANT TOWNSHIP FIRE DEPARTMENT

DEAR APPLICANT,

THANK YOU FOR YOUR INTEREST IN OUR FIRE DEPARTMENT. WE ARE A GROWING DEPARTMENT WHO ACCEPTS APPLICATIONS ON A CONTINUOUS BASIS. PLEASE FILL-OUT THE APPLICATION IN ITS ENTIRETY. IF ANY FIELD DOES NOT APPLY TO YOU, PLEASE FILL-IN THE SPACE WITH "N/A." THE APPLICATION MUST BE FILLED OUT ENTIRELY IN BLUE INK. YOU WILL INCLUDE THE STREET NUMBERS OF A PHYSICAL ADDRESS. IF YOU DO NOT HAVE A MIDDLE NAME, WRITE "NMN" IN THE SPACE PROVIDED. INCLUDE AREA CODES FOR ALL PHONE NUMBERS. INCLUDE THE APPLICATION DATE. APPLICATION WILL BE SIGNED BY A WITNESS. **HANDWRITING MUST BE NEAT AND LEGIBLE. DO NOT LEAVE ANY SPACE BLANK!**

TO APPLY FOR MEMBERSHIP WITH THIS DEPARTMENT, YOU MUST MEET **ALL** OF THE FOLLOWING MINIMUM CRITERIA:

VALID OHIO DRIVER'S LICENSE
18 YEARS OF AGE OR OLDER
HIGH SCHOOL DIPLOMA OR GED
NO FELONIES. MISDEMEANORS TO BE DETERMINED

PLEASE ATTACH THE FOLLOWING INFORMATION LISTED BELOW TO YOUR APPLICATION. **Do not** ATTACH ANY CERTIFICATES OF CONTINUING EDUCATION CLASSES. **ONLY** ATTACH ACTUAL CERTIFICATIONS.

A COPY OF YOUR VALID OHIO DRIVER'S LICENSE
A COPY OF ALL CERTIFICATIONS FOR FIRE, EMS, HAZ-MAT, ETC. (IF APPLICABLE)
A DRIVER'S ABSTRACT (OBTAINED THROUGH THE BMV)
A COPY OF HIGH SCHOOL DIPLOMA OR GED
A COPY OF YOUR BIRTH CERTIFICATE
IF MILITARY/VETERAN, MEMBER COPY 2 OF YOUR DD-214, AND/OR A COPY OF CURRENT VALID ID

ATTACHED ARE TWO BLANK PAGES, FOR YOUR CONVENIENCE, FOR YOU TO SUBMIT AN AUTOBIOGRAPHY. PLEASE INCLUDE THIS WITH YOUR APPLICATION. THE AUTOBIOGRAPHY WILL BE NO LESS THAN ONE COMPLETE PAGE. AGAIN, PLEASE PRINT LEGIBLY. PROPER SPELLING AND PUNCTUATION IS CRITICAL.

FAILURE TO PERFORM ANY OF THE REQUIRED TASKS ABOVE WILL RESULT IN THE IMMEDIATE DISMISSAL OF YOUR APPLICATION. APPLICATIONS WILL BE HAND DELIVERED TO ON DUTY PERSONNEL, OR MAILED. ONCE AGAIN, THANK YOU FOR YOUR INTEREST IN THE PLEASANT TOWNSHIP FIRE DEPARTMENT.

SINCERELY,
THE ADMINISTRATIVE STAFF

DO NOT INCLUDE THIS LETTER WITH THE APPLICATION



20 horizontal lines for writing.



APPLICATION DATE _____

POSITION APPLYING FOR: FULL-TIME PART-TIME VOLUNTEER *APPLICANT INFORMATION*

NAME: (LAST) (FIRST) (M.I.)

PHYSICAL ADDRESS (CITY) (STATE) (ZIP)

MAILING ADDRESS (CITY) (STATE) (ZIP)

HOME PHONE # CELL PHONE # (EMAIL ADDRESS)

*SKILLS AND QUALIFICATIONS*ARE YOU OVER 18 YEARS OF AGE? YES NO ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE STATE OF OHIO? YES NO DO YOU POSSESS ANY SPECIAL SKILLS, LICENSES, OR CERTIFICATIONS THAT CAN ENHANCE YOUR JOB PERFORMANCE OR OUR ORGANIZATION? YES NO

IF YES, PLEASE SPECIFY (CHECK ALL THAT APPLY):

FIRE CERTIFICATIONS: FIREFIGHTER I FIREFIGHTER II EMS CERTIFICATIONS: EMT ADVANCED PARAMEDIC COLLEGE DEGREE: ASSOCIATES BACHELORS MASTERS DOCTORATE OTHER:

2925 LANCASTER-THORNVILLE ROAD, LANCASTER, OH 43130 PHONE: (740) 654-8355, FAX: (740) 654-7276

WWW.PLEASANTFIRE.COM / STATION570@GMAIL.COM



CERTIFICATIONS/TRAINING: RESCUE TECHNICIAN CFSI FIRE INVESTIGATOR FIRE INSTRUCTOR EMS
 INSTRUCTOR HAZMAT TECHNICIAN OTHER:

EDUCATIONAL INFORMATION

GENERAL EDUCATION

PLEASE LIST ALL SCHOOLS ATTENDED, STARTING WITH THE MOST RECENT. PLEASE INCLUDE ALL COLLEGES, UNIVERSITIES, HIGH SCHOOL, & ACADEMIES. PLEASE ATTACH AN ADDITIONAL SHEET IF NEEDED.

	NAME	ADDRESS	YEARS ATTENDED	GRADUATE?	DIPLOMA/DEGREE
HIGH SCHOOL				Yes <input type="checkbox"/> No <input type="checkbox"/>	
COLLEGE				Yes <input type="checkbox"/> No <input type="checkbox"/>	
COLLEGE				Yes <input type="checkbox"/> No <input type="checkbox"/>	

FIRE, EMS, HAZ-MAT, & SPECIALTY TRAINING

PLEASE LIST ALL SCHOOLS ATTENDED, STARTING WITH THE MOST RECENT. PLEASE INCLUDE ALL COLLEGES & ACADEMIES. PLEASE ATTACH AN ADDITIONAL SHEET IF NEEDED.

NAME	ADDRESS	YEAR COMPLETED	TRAINING RECEIVED

PREVIOUS ADDRESSES

2925 LANCASTER-THORNVILLE ROAD, LANCASTER, OH 43130 PHONE: (740) 654-8355, FAX: (740) 654-7276
 WWW.PLEASANTFIRE.COM / STATION570@GMAIL.COM



HOW LONG HAVE YOU LIVED AT YOUR CURRENT ADDRESS LISTED ON PAGE 1? ___ YEARS MONTHS

PLEASE LIST THE PREVIOUS ADDRESSES IN WHICH YOU LIVED FOR THE LAST 5 YEARS, BEGINNING WITH THE MOST RECENT. IF UNDER 21, JUST GO TO 16 YEARS OLD. DO NOT INCLUDE YOUR PRESENT ADDRESS.

ADDRESS (PHYSICAL & MAILING)	(CITY)	(STATE)	(ZIP)
ADDRESS (PHYSICAL & MAILING)	(CITY)	(STATE)	(ZIP)
ADDRESS (PHYSICAL & MAILING)	(CITY)	(STATE)	(ZIP)

EMPLOYMENT INFORMATION

PLEASE LIST ALL EMPLOYERS, STARTING WITH THE MOST RECENT. PLEASE INCLUDE ALL EMPLOYERS FROM THE PAST 5 YEARS. PLEASE ATTACH AN ADDITIONAL SHEET IF NEEDED.

EMPLOYER INFORMATION	EMPLOYMENT DATES	MAY WE CONTACT YOUR EMPLOYER?	REASON FOR LEAVING?	SUPERVISOR INFORMATION
NAME	START DATE	YES <input type="checkbox"/> NO <input type="checkbox"/>		NAME
ADDRESS	END DATE			PHONE NUMBER
EMPLOYER INFORMATION	EMPLOYMENT DATES	MAY WE CONTACT YOUR EMPLOYER?	REASON FOR LEAVING?	SUPERVISOR INFORMATION
NAME	START DATE	YES <input type="checkbox"/> NO <input type="checkbox"/>		NAME
ADDRESS	END DATE			PHONE NUMBER
EMPLOYER INFORMATION	EMPLOYMENT DATES	MAY WE CONTACT YOUR EMPLOYER?	REASON FOR LEAVING?	SUPERVISOR INFORMATION
NAME	START DATE	YES <input type="checkbox"/> NO <input type="checkbox"/>		NAME

2925 LANCASTER-THORNVILLE ROAD, LANCASTER, OH 43130 PHONE: (740) 654-8355, FAX: (740) 654-7276

WWW.PLEASANTFIRE.COM / STATION570@GMAIL.COM



ADDRESS	END DATE			PHONE NUMBER
EMPLOYER INFORMATION	EMPLOYMENT DATES	MAY WE CONTACT YOUR EMPLOYER?	REASON FOR LEAVING?	SUPERVISOR INFORMATION
NAME	START DATE			NAME
ADDRESS	END DATE	YES <input type="checkbox"/> No <input type="checkbox"/>		PHONE NUMBER

REFERENCES

PLEASE LIST 3 REFERENCES THAT WE MAY CONTACT TO DESCRIBE YOUR CHARACTER. ALL REFERENCES MUST HAVE BEEN KNOWN FOR AT LEAST 2 YEARS. DO NOT INCLUDE FAMILY MEMBERS OR ANYONE WITHIN YOUR HOUSEHOLD.

NAME	ADDRESS	CITY, STATE, ZIP	PHONE #	YEARS KNOWN

STATEMENT OF UNDERSTANDING

- I certify that all information I have provided in order to apply for and secure work with Pleasant Township is true, complete and correct.
- I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to cancel further consideration of this application, or immediately discharge me from the employer's service, whenever it is discovered. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview.

2925 LANCASTER-THORNVILLE ROAD, LANCASTER, OH 43130 PHONE: (740) 654-8355, FAX: (740) 654-7276

WWW.PLEASANTFIRE.COM / STATION570@GMAIL.COM



- I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using information in the employment process and all other persons, corporations or organizations for furnishing such information about me.
- I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law. I understand that Pleasant Township is an equal opportunity employer and considers all applicants, regardless of race, color, religion, gender, national origin, age, disability, veteran status, or any other legally protected status and that all reasonable requests for ADA assistance during the testing process must be submitted in writing.
- I understand that I may be required to successfully complete a physical ability and/or written examination and that successfully passing these examinations does not constitute a position with the employer.
- If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration.
- I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Pleasant Township Board of Trustees.
- I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

APPLICANT SIGNATURE

DATE

WITNESS SIGNATURE

PRINTED NAME

DATE

INFORMATION RELEASE

In connection with my application for employment, I understand that an investigative consumer report may be requested that will include information as to my character, work habits, performance, and experience, along with reasons for termination of past employment. I understand that as directed by department policy and consistent with the job described, you may be requesting information from public and private sources: workers' compensation injuries, driving record, criminal record, education, credentials, credit, and references. I voluntarily and knowingly authorize the company and/or its agents, to verify any aspect of the information contained in my employment application or through public and private sources. I further understand that misrepresentations or omissions in my employment application may be cause for rejection or may be cause for subsequent dismissal if I am hired.

Medical and workers' compensation will only be requested in compliance with the Federal Americans with Disability Act, (ADA). According to the Fair Credit Reporting Act (FCRA), I am entitled to know if employment is denied because of information obtained by my prospective employer from a consumer reporting agency. If so, I will be notified and given the name and address of the agency or the source which provided the information.

2925 LANCASTER-THORNVILLE ROAD, LANCASTER, OH 43130 PHONE: (740) 654-8355, FAX: (740) 654-7276

WWW.PLEASANTFIRE.COM / STATION570@GMAIL.COM



I voluntarily and knowingly authorize any former employer, person, firm, corporation, school or government agency, its officers, employees and agents to release any and all information concerning my former employment to you and your agents. I understand that the employment information may include, but is not necessarily limited to, performance evaluation and reports, job descriptions, disciplinary reports, letters of reprimand, and opinions regarding my suitability for employment possessed by it.

I voluntarily and knowingly, fully release and discharge, absolve, indemnify and hold harmless you, your agents and any former employer, person, firm, corporation, school or government agency, its officers, employees and agents from any and all claims, liability, demands, causes of action, damages, or costs, including attorney's fees, present or future, whether known or unknown, anticipated or unanticipated, arising from or incident to the disclosure or release of any such information to you, your agents, or consumer reporting agency.

I hereby authorize you to procure a consumer report as part of the pre-employment background investigation. If hired, this authorization shall remain on file and shall serve as an ongoing authorization for you to procure consumer reports at any time during my employment period. I understand that I must provide all of the information within this application to adequately complete said screening, and acknowledge that this information will not affect any hiring decisions.

APPLICANT SIGNATURE

DATE

WITNESS SIGNATURE

PRINTED NAME

DATE

PERSONAL BACKGROUND INFORMATION

MALE FEMALE

NAME: (LAST)

(FIRST)

(M.I.)

SEX

OTHER NAMES USED

SOCIAL SECURITY NUMBER

DATE OF BIRTH

DRIVER'S LICENSE NO

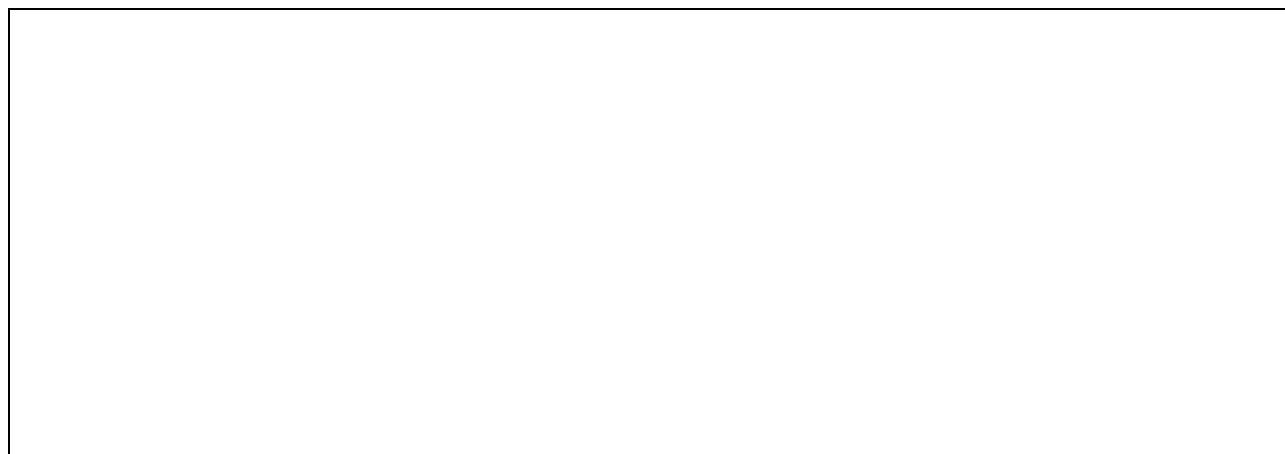
DL STATE

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO

IF SO, PLEASE EXPLAIN BELOW

2925 LANCASTER-THORNVILLE ROAD, LANCASTER, OH 43130 PHONE: (740) 654-8355, FAX: (740) 654-7276

WWW.PLEASANTFIRE.COM / STATION570@GMAIL.COM





DEPARTMENT USE ONLY

/ /

INTERVIEW DATE

(CIRCLE THOSE THAT APPLY)

POSITION INTERVIEWED FOR: FULL-TIME PART-TIME VOLUNTEER EVALUATORY
 REQUIREMENTS MET:

MEDICAL? Y N PHYSICAL AGILITY? Y N N/A

OP&F PENSION FUND? Y N N/A OTHER REQUIREMENTS? Y N N/A

LIST REQUIREMENTS NOT MET

REFERENCES CONTACTED:

REFERENCE #	CONTACTING PERSON	DATE & TIME
1		
2		
3		

REFERENCE COMMENTS:

REFERENCE #	COMMENTS
1	
2	
3	

COMMENTS:



ACCEPTED: Y N DATE: _____

EVALUATIONARY VOLUNTEERS

 / / / / / /
 PROGRAM ACCEPTANCE COMPLETION OFFICIAL APPOINTMENT

VOLUNTEER PROBATION

 / / / /
 START DATE COMPLETION DATE

INTERVIEW COMMITTEE

PRINT NAME	SIGNATURE	DATE
		/ /
		/ /
		/ /
		/ /

FIRE CHIEF SIGNATURE

/ /
 DATE