

Brandon Fire District No. 1 Employment Application

Applying for a position with: Water Department Fire Department

Position for which you are applying: _____

SECTION 1 - Demographic Information

Name (Last, First Middle)			
Maiden Name or Alias Names			
Mailing Address			
Physical Address			
City, State, Zip Code			
Home Phone		Cell Phone	Email
Height	Weight	Education Level Completed	Date Completed
How long have you been a resident of Brandon, Leicester or Goshen? Which town?			

Personal References

Provide the names of three (3) personal references that are not listed as a supervisor above and are not related to you.

Name	Address	Phone	Relationship

Current Employment Information

Employer Name							
Mailing Address of Employer							
Physical Address of Employer							
City, State, Zip Code							
Supervisors Name and Title					Supervisor's Phone Number		
Date of Hire					Job Title		
List Normal Work Hours	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Give Brief Job Description							

Previous Employment Information

Employer Name							
Mailing Address of Employer							
City, State, Zip Code							
Supervisors Name and Title					Supervisor's Phone Number		
Date of Hire					Job Title		
Give Brief Job Description							

Do you have any medical conditions that may affect your ability to perform duties or may require special arrangements or training?

(Circle one) Yes No

Have you been convicted of a motor vehicle violation within the last two (2) years?

(Circle one) Yes No

Have you ever been convicted of any criminal charges?

(Circle one) Yes No

If you answer "Yes" to any of the above questions, please explain the conditions and/or circumstances below. Answering "Yes" to any of these questions shall not automatically disqualify an applicant.

Do you have any previous related experience?

(Circle one) Yes No

If you answered "Yes" above, provide details below and attach any training certificates with this application.

Type of Experience	Length of time (years)	Location	Contact

Do you have any special skills or certifications that would benefit the Fire District? Include trade skills, special knowledge and other pertinent information.

Name: _____

SECTION 2 - EMPLOYMENT INFORMATION

Driver's License Information: Number: _____

State: _____

Social Security Number: _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Date of Birth: _____ Place of Birth: _____

Affidavit

If accepted as an employee of the Brandon Fire District No. 1, the applicant agrees to abide by all of the Policies, Rules and Regulations and procedures adopted or promulgated by the proper authority. The applicant will also follow the orders and direction of the Water Department Superintendent or the Fire Officers of the Brandon Fire Department.

Further, the applicant swears that the information contained in this application is true, complete and correct, and understands that any falsification or misrepresentation detected on this application or during the screening process may result in immediate disqualification or termination of employment, if already appointed.

The applicant authorizes the Brandon Fire District No. 1 and its agents to conduct such investigations, background checks and/or reviews of his/her personal history as they may deem necessary to determine suitability for appointment and employment with the Brandon Fire District No.1. This may include, but not limited to, a check of the applicant's motor vehicle records, interviews with listed references, current employer, criminal checks, verification of social security number and any other form of investigation, disclosure and/or review as deemed necessary by the Brandon District No. 1 and/or its agents.

Applicant's Signature

Date

STATE OF VERMONT

COUNTY OF _____

On the ___ day of _____, 20___ before me personally appeared _____, known to be the person described in and who executed the foregoing Application for Employment, and (s)he acknowledged that (s)he executed the same of his/her free act and deed.

Seal

Before me, _____

Notary Public

My Commission Expires on: _____

Printed Name of Notary: _____

For Brandon Fire District Use Only

Date

Date Application Received by Fire District: _____

Background Check Completed: Satisfactory Unsatisfactory _____

Comments: _____

Date Interviewed by Department Head: _____

Date interview by Prudential Committee: _____

Applicant notified of Fire District Decision: _____

Date applicant received employment package: _____

Date employment package returned to Department Head: _____

Date employee started employment: _____

Date employee received Policy Manual and Rules and Regulations: _____

Date IRS W-4 form received from employee: _____

Date USCIS Form 1-9 returned: _____

Date Employee received Policy and Rules and Regulations: _____

Date Employee received appropriate equipment: _____