



APPLICATION FOR VOLUNTEER FIREFIGHTER

Santa Clara County Central Fire Protection District



An Internationally Accredited Agency

14700 Winchester Blvd., • Los Gatos, CA 95032 • (408) 378-4010

Personal Information

Last Name _____ First _____ Middle _____
 Home Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Work Phone _____ Cell Phone _____
 Email Address _____
 Social Security # (last 4 digits) _____ Driver's License# _____ State _____ Class _____
 Can you, after employment, submit verification of your legal right to work in the United States? Yes No
 Have you ever been convicted of charges other than minor traffic violations after your 18th birthday? Yes No
 If Yes, provide court and circumstances below. Conviction is not an automatic bar to be a volunteer. Each case is considered individually. Failure to list a conviction is cause for automatic disqualification to be considered for volunteer firefighter.

Education

Name of last high school attended _____ Location _____
 Did you graduate from high school? _____ If you did not graduate, do you have a GED? _____
 Applicants who do not have a high school diploma must submit a statement from an accredited educational institution showing GED scores or certificate.

College or University (Name and Location)	Major	Degree(s) Received	Units Completed

Indicate any other professional certifications or special training that you believe qualify you for this position:

Work Experience

List all positions you have held in the last ten years, beginning with your most recent position. Attach additional sheets if needed.

From _____ To _____ Salary _____ Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Hours per week _____ Supervisor Name and Phone _____ _____ May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Name and Address of Employer _____ _____ _____ Job Title and Duties _____ _____ _____ _____ Reason for Leaving _____
From _____ To _____ Salary _____ Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Hours per week _____ Supervisor Name and Phone _____ _____ _____	Name and Address of Employer _____ _____ _____ Job Title and Duties _____ _____ _____ _____ Reason for Leaving _____
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Applicant Signature

I hereby certify that all statements made in this application are true and I agree and understand that any misstatement or omission of material facts will cause forfeiture of my eligibility as a volunteer firefighter. I also understand that falsification or omission of information regarding any material facts including convictions will result in my dismissal as a volunteer firefighter.

I have read and agree to the statement above.

Applicant's Signature

Date

Voluntary Self-Identification

Your voluntary answers to this section will provide statistics needed to evaluate our recruitment program as well as prepare statistical reports required by federal, state and county agencies. This section will be detached. No decisions for selection will be made based on the information provided.

Sex

- Male
- Female

Ethnic Group

- Two or More Races all persons who identify with more than one of the below categories
- American Indian or Alaskan Native
- Asian origins in the Far East, Southeast Asia, or the Indian Subcontinent
- Black or African American
- Filipino
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander
- White origins in any of original peoples of Europe, Middle East or North Africa

Recruitment History

How did you learn about this position for volunteer firefighter? Please check the applicable box and provide details as appropriate.

- Friend or relative
- County Fire Department employee
- An organization or group
- Newspaper/On-line advertisement Agency _____
- Job posting or announcement Where? _____
- Other _____