



**Nehalem Bay Fire & Rescue District  
36375 Hwy 101 N.  
Nehalem, OR 97131**

An Equal Opportunity Employer

## APPLICATION FOR EMPLOYMENT

Position: Division Chief - Training

**INSTRUCTIONS:** This application is part of the selection process. Please fill it out carefully in your own handwriting. It must be legible. Use blue or black ink. If more space is needed use the back of the applicable page. Make sure to use the same format as on the applications.

Name:

\_\_\_\_\_ First

\_\_\_\_\_ Middle

\_\_\_\_\_ Last

Address:

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Driver's License:

Social Security Number:

Do you have a valid driver's license?    Yes    No

\_\_\_\_\_                  \_\_\_\_\_

If Oregon please list number :

Telephone Number(s)

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Residence: \_\_\_\_\_

Business: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Type/Class \_\_\_\_\_

Professional Licenses and Certificates:

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### EDUCATION AND FORMAL TRAINING

Do you have a high school diploma?    Yes – list school and location \_\_\_\_\_  
School                  City                  State

No – list highest grade completed \_\_\_\_\_

Do you have a GED Certificate?    Yes – list school and location \_\_\_\_\_  
School                  City                  State

## Employment Application Cont.

<b>EDUCATION AND FORMAL TRAINING CONT.</b>					
Name of school	From	To	Field of study / Course Title / Subject	Hours completed	Certificates / Degrees
<b>EMPLOYMENT HISTORY</b>					
<ul style="list-style-type: none"> <li>List below your work experience, paid or unpaid, beginning with your present or most recent job.</li> <li>Describe each job separately, emphasizing your specific tasks and supervisory, technical or other responsibilities. Give special attention to experience relating to the job for which you are applying. Explain significant breaks in work experience.</li> </ul>					
Employer		Address		From	To
Your Title		Supervisors Name and Telephone			
Duties (be specific)				Paid	Unpaid
May we contact this employer?    Yes    No			Reason for leaving		
Employer		Address		From	To
Your Title		Supervisors Name and Telephone			
Duties (be specific)				Paid	Unpaid
May we contact this employer?    Yes    No			Reason for leaving		

### Employment Application Cont.

Employer	Address	From	To
Your Title	Supervisors Name and Telephone		
Duties (be specific)		Paid	Unpaid
May we contact this employer?    Yes    No	Reason for leaving		
Employer	Address	From	
Your Title	Supervisors Name and Telephone		
Duties (be specific)		Paid	Unpaid
May we contact this employer?    Yes    No	Reason for leaving		
Employer	Address	From	
Your Title	Supervisors Name and Telephone		
Duties (be specific)		Paid	Unpaid
May we contact this employer?    Yes    No	Reason for leaving		

### Employment Application Cont.

Employer	Address	From		
Your Title	Supervisors Name and Telephone			
Duties (be specific)	Paid	Unpaid		
May we contact this employer?    Yes    No	Reason for leaving			
Employer	Address	From		
Your Title	Supervisors Name and Telephone			
Duties (be specific)	Paid	Unpaid		
May we contact this employer?    Yes    No	Reason for leaving			
<b>References: Give the names of three persons not related to you, whom you have known at least one year.</b>				
Name	Address	Business	Years Known	Phone #
Please list any criminal convictions and arrest. Please indicate date, nature and place of offense and disposition. Briefly describe the circumstances.				

## Employment Application Cont.

Please list all traffic citations received in the last 7 years.			
Date	Offense Type	Court / Location	Disposition (Fine / diversion / etc.)
Have you ever been in a motor vehicle crash that you were at fault?    Yes    No			
If yes please explain (list all)			
Date			
Date			

By my signature below, I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should an investigation disclose untruthful or misleading answers, my application may be rejected or my employment with the District terminated. In addition, I authorize previous employers and references to release information as necessary to verify my qualifications for employment.

Further, Nehalem Bay Fire & Rescue District requires an employment physical. Such physical will include a drug screening test. My signature below serves as authorization to the physician to release all information relative to the employment physical and drug testing results. If such results indicate inability to perform the job applied for or drug use, I understand my application may be rejected or my employment with the District terminated.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Deliver Application to:**

**Nehalem Bay Fire & Rescue District  
Division Chief Application  
36375 Hwy 101 N.  
Nehalem, OR 97131**