CONVOY FIRE & EMS APP FOR EMPLOYMENT





Full Name	:					
Full Address	:					
E-Mail	:		Phone	:		
Date Of Birth	:	MM/DD/YYYY	Driver L	icense :	Yes	No
Social Sec #	:	###-##-####	18 year	s of Age or older?	Yes	No
If hired, Can yo	u p	rovide written evidence that you	are authorize	ed to work in the US	; ?	
					Yes	No
Edu	ucc	ation				

Туре	Name/Location	Course of study	# of years completed	Degree/Diploma
Elem & JR High				
High School				
College				
Technical or Other				

Employment Record

Company Name Address	Kind of Work	Date Started/Left	Rate of Pay	Reason for Leaving

	U.S. Military Service					
Branch (of Service :					
From:		To:				
Rank and Type of Service :						
Training	Training/Experience Recieved :					

References (Do not include relatives)

Name	Occupation	Years Known	Personal or work related	Phone Number

Employment				
Type of Work Desired:	Salary Desired:			
How Were You Referred To Our Organization :				
Do You Have Any Relatives Who Are Employed By This Organization?	Yes No			
Please Specify:				
Is there any information we would need about your name, or use of and for us to be able to check your wo	Yes No			
Please Specify:				
Please list any additional information that relates to your ability to perform applied such as licenses, professional memberships, hobbies, etc.	orm the job for which you have			
Applicant's Statement				
I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the chief operating officer of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.				
I understand this application will be active for a period of one year; after considered for employment, I must submit a new application.	that time, if I wish to be			
I understand that the employer will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.				
I certify that all the statements herein are true and understand that any shall be sufficient cause for dismissal or refusal of employment.	falsification or willful omission			
Signature :	Date:			

CONSENT TO PERFORM CRIMINAL HISTORY BACKGROUND CHECK

Last Name: Maiden and/or Other Last Names Used: Current Address: City: County: State: Zip: Date Of Birth: Maide: Female: This authorization and consent for release of personal information acknowledges that the Village of Convoy (Hereafter referred to as "Company") and/or the Convoy Police Department and/or Van Wert County Sheriffs Department, may now, or at any time I am assigned to, volunteer with or am employed by this Company, conduct investigations whether the records are of a public, private or confidential nature. These investigations might include, but are relimited to, searches of educational institutions attended; financial or credit institutions, including records of loans; records of							
Current Address: City: County: State: Zip: Date Of Birth: Social Security #: Male: Female: This authorization and consent for release of personal information acknowledges that the Village of Convoy (Hereafter referred to as "Company") and/or the Convoy Police Department and/or Van Wert County Sheriffs Department, may now, or at any time I am assigned to, volunteer with or am employed by this Company, conduct investigations whether the records are of a public, private or confidential nature. These investigations might include, but are not applied to the convolution of the							
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Date Of Birth: Social Security #:							
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commercial or retail credit agencies; other financial statements; records of previous employment, including work history, efficiency ratings, complaints and grievances filed by or against me; records and recollections of attorney-at-law or of other counsel, whether representing me or any other person (in either a civil or criminal case in which I have been involved); records from the U.S. Veterans' Administration; criminal history information of file in local, state or federal agencies; and motor vehicle records, and following an employment offer, workers' compensation reports from either the Department of Labor, National Personnel Records or the Industrial Commission or similar agencies under the provisions of the Fair Credit Reporting Act 15, U section 1681 et seq. I also authorize the National Personnel Records Center, or other custodian of my military service record, to release to Secure search, the following information and/or copies of documents from my military service record: DD214, service record, and any disciplinary records. I understand that these searches will be used to determine work assignment or employment eligibility under the company's employment or volunteer policies. Therefore, I authorize and consent for full release of records (either orally or in writing) to the authorized representatives of the company. In addition, I release and discharge the company and its agent and associates to t full extent permitted by law from any claims, damages, losses, liabilities, costs expenses or any other charge or complaint filed with any agency arising from retrieving and reporting this information. I understand that according to the Federal Fair Credit Reporting Act, I am entitled to know whether employment was denied based upon the information obtained and to receive, upon written request, a disclosure of the background report.	SC e						
Are you applying for employment in California, Minnesota or Oklahoma? Yes No							
If so, do you want a copy of any Consumer Report prepared concerning you? Yes No							
I understand that California law required Company to give me a copy of any report requested within seven (7) days of the date the information was obtained and that failure to do so will expose Company to liability (Section 1786.29).							
The following are my responses to questions about my criminal record history (if any) with descriptions to any question with a YES answer:							
1. Have you ever been convicted or plead guilty before a court of any federal, state, or municipal criminal offense? (Excluding minor traffic violations) If YES, please provide an explanation below: Yes No							
2. Have you ever received deferred adjudication or similar disposition for any federal, state or municipal criminal offense? If YES, please provide an explanation below: Yes No							

CONSENT TO PERFORM CRIMINAL HISTORY BACKGROUND CHECK Cont.d

3. Have you ever received probat If YES, please provide an explana		on for any federal, state o	or municipal crimin	al offense? Yes	No		
4. Have you ever been convicted		country outside the juris	sdiction of the Unite	ed States?			
If YES, please provide an explana	ation below:			Yes	No		
5. As of the date of this authorize If YES, please provide an explana		ng criminal charges aga	inst you?	Yes	No		
	THIS SECTION IS TO BE USED TO LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE AGE 18 OR HIGH SCHOOL GRADUATION. YOU MUST BE SPECIFIC ABOUT DATES OF RESIDENCE.						
City/Town	County	State	Date From	Date T	·o		
I HEREBY CERTIFY THAT ALL IN UNDERSTAND THAT IF ANY INI OF ANY AND ALL OFFERS OF ETHE EMPLOYER.	FORMATION PROVES TO BE	INCORRECT OR INCOM	PLETE THAT GROUN	NDS FOR THE CA	NCELING		
Signed this	day of	, 20					
Applicant (Print Name)	:						
Applicant Signature :							