

CRANFORD FIRE & EMS EMPLOYMENT APPLICATION

TO APPLICANT: Thank you for your interest in our organization. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types, including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to information obtained from a consumer reporting agency including, but not limited to, information regarding credit data, personal character, general reputation, and mode of living. This list, however, is not exhaustive of the grounds upon which discrimination is prohibited.

PLEASE PRINT CLEARLY.

| PERSONAL INFORMATION | | | | | |
|---|----------------------------|------------------------------|--------------|--|--|
| Date | E-mail address | | 0.00 | | |
| Name | | | | | |
| Last | First | Middle | | | |
| Social Security # | Cell # | Home# | | | |
| Address | | | | | |
| # Street | City | State | ZIP | | |
| Driver's License # | | Exp. Date | | | |
| Are you legally eligible for employment i proof of your eligibility to work in the US | n the USA? Yes No _ SA. | _ If hired, you are require | ed to submit | | |
| Are you over the age of eighteen? Yes _ minimum legal age. | No If no, hiring is s | subject to verification that | you are of | | |
| Are you able to safely perform the duties | of firefighter and/or El | MT? Yes No | | | |
| Position(s) applied for | os No Isaaa | | | | |
| Were you previously employed by us? Ye | | | | | |
| If your application is considered favorably, on what date will you be available for work? | | | | | |

| The second secon | | | | 1950 P. T. | | f special benefit in the with this application. |
|--|--------------------|------------------|------------------------------|--|-------------------------|---|
| Job for which you are | applying | ; riease | Submit Co | pies or air | relevant certifications | with this application. |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| EMPLOYMENT HISTO | | mplovme | int heginn | ing with w | our most recent: | |
| I. | u past ci | прюутте | irit, begiiiii | ing with y | our most recent. | |
| Name & Address of Company and Type of Business | From Mo & Yr | To Mo & Yr | Weekly Starting Salary | Weekly Last Salary | Reason for Leaving | Name of Supervisor |
| | | | | | | |
| | | | | | | |
| Phone # | | | | | | |
| II. | | | | | | |
| Name & Address of | Fram | То | Manleha | Manlike | | |
| Company and Type of Business | From Mo & Yr | To Mo & Yr | Weekly Starting Salary | Weekly Last Salary | Reason for Leaving | Name of Supervisor |
| | | | | | | |
| | | | | | | |
| Phone # | | | | | | |
| III. | | | L | | | |
| Name & Address of | From | То | Weekly | Weekly | | |
| Company and Type of Business | Mo & Yr | Mo & Yr | Starting Salary | Last Salary | Reason for Leaving | Name of Supervisor |
| ···· | | | | | | |
| | | | | | | |
| Phone # | | | | | | |
| IV. | | | | | | |
| Name & Address of Company and Type of Business | From Mo & Yr | To Mo & Yr | Weekly Starting Salary | Weekly Last Salary | Reason for Leaving | Name of Supervisor |
| | | | , | | | |
| | | | | | | |
| Phone # | | | | | | |

| Employer I? Employer II? Employer III? Employer IV? | Yes No Yes No Yes No Yes No | | | | |
|--|---|--------------------|----------------------------------|------------------------------------|----------------------|
| | e a | Signe | d | | |
| RECORD OF ED | UCATION | | | | |
| | | | | Γ = | Γ |
| School | Name & Address of School | Course of Study | Circle Last Year Completed | Did You Graduate? Circle One | List Diplor Degre |
| Elementary | | | 5 6 7 8 | YES NO | |
| High | | | 1 2 3 4 | YES NO | |
| College | | | 1 2 3 4 | YES NO | |
| Other (Specify) | | | 1 2 3 4 | YES NO | |
| PERSONAL REFE | ERENCES (Not former employers | or Relatives) | | | |
| Nam | e & Occupation | Address | | Phone Number | |
| | | | | | |
| | | | | | |
| | | | | | |
| Nay we telepho | ne you to follow up on this appli | cation at home | ? Yes No | | |
| Nav we telepho | e best time to call? ne you to follow up on this applie best time to call? siness telephone number? | cation at work? | Yes No | | |

PLEASE READ AND SIGN BELOW:

The facts set forth in my application for employment are true and complete. I understand that, if I am employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party, with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the forgoing, and then only in a writing signed by an officer.

| Signature of Applicant: | | |
|-------------------------|--|--|
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