



ARCATA FIRE DISTRICT

EMPLOYMENT APPLICATION

Please fill out all sections of this form completely. Failure to do so (include using "see resume" may result in rejection during the selection process. This application and all attachments become the property of the Arcata Fire District and will not be returned to the applicant.

APPLICATION INFORMATION

Name: _____
Last First MI

Telephone: _____

Address: _____

Home: _____

Cell: _____

_____ City State Zip

Do you need reasonable accommodation to take an oral interview? Yes No

Mailing Address: _____

_____ City State Zip

Driver's License Number: _____

E-mail Address: _____

State Issued: _____ Class: _____

Are you over 18 years of age? Yes No

PREVIOUS EMPLOYMENT / RELATIVES EMPLOYED WITH THE DISTRICT

Are you a member of the Arcata Fire District at this time? Yes No

If yes, in what capacity? _____

Have you previously been employed or volunteered with the District? Yes No

If yes, please specify title and employment dates: _____
Title Dates

Names of any District employee you are related to or with whom you live: _____
Relationship: _____

Arcata Fire District is an equal opportunity employer and will not discriminate against an employee or applicant for employment because of race, color, religion, gender, sexual orientation, age, marital status, national origin or mental or physical disability unless based on a bonafide occupational qualification.

CERTIFICATION, AUTHORIZATION, AND RELEASE

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE FULLY COMPLETED, SIGNED, AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THESE STATEMENTS, PLEASE ASK THEM BEFORE SIGNING.

1. All answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false, misleading, or incomplete information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize the District to obtain information about me from any of the prior employers or persons named in this application, including those provided by me as references. I also agree to sign an authorization relasing these prior employers and persons of liability for providing such information.

Please initial: _____

2. I understand that if I am hired, I will be responsible for complying with all policies and rules of the District as they presently exist or are later modified. I also understand that except as otherwise provided in an applicable collective bargaining agreement, or other written agreement signed by the Fire Chief, that I may be suspended without pay, demoted, or discharged only for just cause. I further understand my employment with the District can be terminable at-will for any reason and at any time without notice, at the option of the District or myself, except as prohibited by applicable law.

Please initial: _____

I have read, understand and agree with all of the above statements.

Signature

Date

Mail, email or deliver completed application and resume to:

**Arcata Fire District
2149 Central Avenue
McKinleyville, CA 95519**

Email: info@arcatafire.org

FAXED APPLICATIONS WILL NOT BE ACCEPTED

NOTE: This application is only valid for the job position and job opening applied for. To be considered for other job positions or job openings, you must submit a new application.