



Village of Pleasant Prairie

9915 39th Avenue

Pleasant Prairie, WI 53158

(262) 925-6731 ■ Fax (262) 925-6788



Employment Application – Fire & Rescue Department

Instructions

Please print or type all information. The application must be filled out accurately and completely. Answer all questions. Do not leave an item blank. If an item does not apply, write N/A (not applicable). Incomplete applications will not be considered. All statements made on the application are subject to verification. Exaggerated, false, or misleading statements may be cause for rejection of the application and/or termination of employment. Eligibility for hire or appointment as a member may be based on a rating of this application; therefore, completeness and accuracy is of the utmost importance. You may use additional sheets if necessary and may attach a resume.

Applicant Information

Full Name:			Date:
<i>Last</i>	<i>First</i>	<i>M.I.</i>	
Address:			For Office use Only:
<i>Street Address</i>	<i>Apartment/Unit #</i>		
<i>City</i>	<i>State</i>	<i>ZIP Code</i>	
Phone ()	Cell Phone ()		
Email (required)			
Position Applied for:			
Type of employment desired: Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/>			
▶ Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Written Exam: Background Check: DL Check: Fire Certification: EMS Certification: PFC:
▶ If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
▶ If yes, when? _____	<input type="checkbox"/>	<input type="checkbox"/>	
▶ Are you at least 18 years old?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
▶ Will you work nights?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
▶ Will you work weekends?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
▶ Will you work shift work?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
▶ Are you or have you been a member of a volunteer/paid fire department or rescue squad? If yes, where? _____ Date: _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
▶ Have you ever been convicted of a crime in the last seven (7) years? If yes, explain: _____	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Note: A conviction does not automatically mean you cannot be a member or employed by the Village of Pleasant Prairie Fire & Rescue Department. The nature of the offense and how long ago it occurred are given consideration.

Driver's License Information

▶ Do you have a valid driver's license?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Driver's License No. _____	State: _____	Expiration Date: _____
▶ Do you have automobile Insurance?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Name of Insurance Company: _____		
▶ Has your license ever been revoked or suspended? If yes, provide details: _____		

Education

Do have a High School diploma? YES NO

High School Name: _____

GED? YES NO If not, highest grade completed: _____

Address: _____

List Colleges and Universities attended below:

Name and Location	Credit Hours		Graduate		Field of Study	Degree Received
	Sem	Qtr	YES	NO		

List special training pertaining to the position you are applying for (Business, Trade, Vocational, Armed Forces, Schools, etc.) below. You may attach copies of your certificates. Attach additional sheets, if necessary.

Name and Location	Hours Completed	Subject	Certificate Received	Expiration Date (if necessary)

Previous Employment

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Previous Employment Continued

Company: _____ Phone: () _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

References (List 3 references that have known you for at least two (2) years. Do not include relatives.)

Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: () _____
Address: _____

Disclaimer and Signature

I understand if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using information and all other persons, corporation or organizations for furnishing such information.

The employer does not lawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurance must be in writing and signed by an authorized officer.

I understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature: _____ Date: _____

Authorization for Release of Information

I hereby empower an employee of the Village of Pleasant Prairie or authorized representative bearing this release to, within one (1) year of its date, obtain information and records pertaining to me from any or all of the following sources:

- Municipal, State or Federal law enforcement agencies
- Selective Service System
- Any place of business (for purposes of obtaining credit or employment date)
- Credit rating bureaus or institutions maintaining individual credit rating files
- Any previous employer
- Any school, college, university or other educational institution

I hereby release any individual or institution, including its offices, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information or any attempt to comply with it. This release is executed to authorize the Village of Pleasant Prairie as a prospective employer, to obtain the above information. It is understood that said information shall be used only in consideration of my employment and shall not be further disseminated for any purpose.

Exceptions to this blanket authorization:

1. Any medical information in the possession of any source named above until subsequent to a conditional offer of employment (per Americans with Disability Act).
2. _____
3. _____

Date

Social Security Number

Witness

Signature (full name)

Address (street & number)

City, State, Zip



Village of Pleasant Prairie

9915 39th Avenue
Pleasant Prairie, WI 53158
(262) 925-6731 ■ Fax (262) 925-6788



The following information is requested to assist the Village of Pleasant Prairie with complying with government record keeping, reporting and other legal requirements. This is strictly voluntary and will be kept confidential. It will be kept separate from your Application for Employment. We request that you fill out this Equal Employment Opportunity Form.

EQUAL EMPLOYMENT OPPORTUNITY

Name:

(Last)

(First)

(Middle)

(Maiden/Former)

Position Applying For:

Date of Birth:

Gender:

Male

Female

- Hispanic or Latino** – All persons of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin regardless of race
- White** (not Hispanic or Latino)
- Black or African American** (not Hispanic or Latino) – All persons having origins in any of the African American racial groups
- Native Hawaiian or Other Pacific Islander** (not Hispanic or Latino)
- Asian** (not Hispanic or Latino) – All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent.
- American Indian or Alaska Native** (not Hispanic or Latino) – All persons having origins in any of the original people of North America and who maintain cultural identification through tribal affiliation or community recognition.
- Two or More Races**