

# Yolo Fire Protection District

PO Box 466, 37720 Sacramento Street Yolo CA 95697 PO Station (530) 662-0566

## APPLICATION—FIREFIGHTER

### General Information

Last Name		First		Middle Initial	
Street Address			City		State Zip Code
Home Phone ( )	Alternate Phone ( )	Cell Phone ( )	E-Mail Address		
Position Applied For (Title)		Department		Date Available	
How did you learn of this vacancy (please list the specific newspaper, web site, or other source)?					
Have you previously used any other names besides what is provided above? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please specify below:					
Are you over 18 years old? <input type="checkbox"/> No <input type="checkbox"/> Yes					

### Education

High School Name		City	State	Diploma/Equivalent? <input type="checkbox"/> Yes <input type="checkbox"/> No
College and/or Technical School Name		City	State	Degree? <input type="checkbox"/> Yes <input type="checkbox"/> No
Major	Degree Earned		If degree not earned, years completed: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	
Other Training or Degrees School Name			City	State
Major		Degree Earned		

### Professional Licenses

Title	No.	State	Expiration Date
Title	No.	State	Expiration Date

### Record of Conviction

Have you ever been convicted of a crime in a civilian or military court? In answering this question, you may omit 1) any record regarding a referral to or participation in any pretrial or post-trial diversion program; 2) any conviction where you have successfully completed a deferred entry of judgment program; 3) any conviction where the Court has ordered the record sealed, expunged or statutorily eradicated; 4) any minor traffic infraction; 5) any misdemeanor conviction for which probation was successfully completed or otherwise discharged and the case has been judicially dismissed; 6) certain misdemeanor marijuana-related convictions more than two years old; and 7) any offenses adjudicated in Juvenile Court.?  No  Yes

Are you currently out on bail or your own recognizance pending trial for a criminal offense?  No  Yes

If YES, to either of the above, please provide on a separate sheet, the date and place of each offense, the specific charge, the date and place of conviction and the fine or sentence received. A criminal conviction is not necessarily a bar to selection. Each case is given individual consideration based on position relatedness.

**Employment History:** List current/most recent employers first, include U.S. military service. Give complete information for jobs held during the past 10 years. Attach additional sheets if more space is needed. Inquiries may be made of former employers.

Employer Name		Address		City		State		Zip Code	
Telephone No ( )		Your Title			Department				
Beginning Date		Ending Date		Final Salary		Supervisor's Name & Title			
If you are still employed, may we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Summary of duties:									
Reason for leaving:									
Employer Name		Address		City		State		Zip Code	
Telephone No. ( )		Your Title			Department				
Beginning Date		Ending Date		Final Salary		Supervisor's Name & Title			
Summary of duties:									
Reason for leaving:									
Employer Name		Address		City		State		Zip Code	
Telephone No. ( )		Your Title			Department				
Beginning Date		Ending Date		Final Salary		Supervisor's Name & Title			
Summary of duties:									
Reason for leaving:									

If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

**Skills**

List software in which you are proficient:									
Second Languages (including Sign Language):		Fluency							
Language		Written				Spoken			
		<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
		<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
		<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Please list any other skills relevant to the position for which you are applying:									

Have you ever been discharged or asked to resign from a job?  No  Yes If yes, explain:

A job description is attached and must be signed and turned in with this application.

Please provide the name/phone number of two references:

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Please mention anything else you would like us to know as to why you should be selected for this position.

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I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that false statements of any kind or omission of facts called for on this application may be a basis for disqualification from the selection process or dismissal from the Yolo Fire Protection District.

Signature of Applicant:

\_\_\_\_\_

Date:

\_\_\_\_\_

Print Applicant Name: \_\_\_\_\_