



Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: () _____ E-mail Address: _____

Work Phone: _____ Social Security No.: _____ DL Number: # _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for a fire department? YES NO If so, where? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references. (No family)

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____





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

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

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____





Little Flock Fire Department

1414 Little Flock Drive
Rogers AR 72756
(479) 936-7912

Questionnaire

1: Have you ever been arrested or charged with any violation or crime, including traffic tickets? Yes No

If yes, explain:

2: Has your driver's license ever been revoked or suspended? Yes No

If yes, explain:

3: Why do you wish to become a member of the Little Flock Fire Department?

4: Are you willing to take a polygraph examination? Yes No

If no, explain:

5: Are you willing to take a psychological? Yes No

If no, explain:

6: What makes you think you would be good at this position?

7: What skill set do you have to offer the citizens of the City of Little Flock?

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. Incomplete applications will be rejected without further review.

Signature: _____ Date: _____





Authorization to Release Information

I, _____, am an applicant with the Little Flock Fire Department (LFFD). In order to process my application, certain information must be made available to LFFD representatives. This information is for my benefit. I hereby authorize, request, and direct educational institutions; my references; my employers (past and present); medical institutions and doctors; any other person, institution, or organization; and all governmental agencies, law enforcement agencies and instrumentalities (local, state, federal, or foreign); wherever said individuals or organizations are situated, to release to the Fire Chief or to any representative thereof, the following information, including but not limited to any document, information, record, or file that he deems material to the processing of my application for employment. Said information can be furnished if the request therefore is made in person or writing.

Pursuant to ARK. CODE ANN. SECTION 12-12-100, I hereby authorize the Little Flock Fire Department representatives to obtain conviction information from any local, state, federal, or foreign agency, registry or repository. I understand that conviction information shall only be used for the purpose of employment with the department and that conviction information may not be re-disseminated.

Applicant Signature

Date

AFFIDAVIT

I, _____, being first duly sworn, deposes and says the following: I am the person who executed the above authorization. I understand its meaning, intention, and effect, and that the statements therein made are true and correct.

Signature _____

Subscribed and sworn to before me this _____ day of _____.

Commission Expiration

Notary Public

ADMINISTRATIVE USE ONLY

Department Instructions:
1. Review application for eligibility; completely filled out, signed by applicant and properly notarized.
2. Approve or decline application.
3. Interview applicant.

DEPARTMENT ADMINISTRATIVE ACTION

Date of interview:	Comments:
Action: APPROVED <input type="checkbox"/> DECLINED <input type="checkbox"/>	
Reason:	

