



## Education/Training

High School Name/Location: \_\_\_\_\_  
Name Location

Graduated? Yes No

If not a high school graduate, do you have a certificate of equivalency (GED)? Yes No

Date of GED: \_\_\_\_\_  
Date

List all education beyond high school:

Name and location	Course of study	Dates attended	Credits completed	Degree earned

## Special Skills and Certifications

List any special active certifications, technical skills, volunteer activities, military training or experience, or other training/activities related to the position you are seeking. For military veterans, please include information on any **transferable skills** obtained through military education or experience that relate directly or indirectly to the position for which you are applying.

Certifications	Number	Expiration	Issue State
DPSST Number Issued?			
CPR/ AED			
Emergency Medical Service (EMR, EMT, AEMT, EMT-I, Paramedic)			

Briefly provide any additional information regarding your specialized skills if pertinent to the position you are applying for:

Do you speak a language other than English fluently? Yes No

If yes, which language(s)? \_\_\_\_\_

## Employment History

List all work experience, including military and volunteer, beginning with your current or most recent position. Briefly describe each position separately, emphasizing your specific tasks and supervisory, technical, or other responsibilities. Give special attention to experience relating to the position for which you are applying for. Account for any periods of unemployment or self-employment. If the space provided is not adequate, please attach additional sheets.

Employer				Address
Your Title				Supervisor's Name/Phone
Begin Date	End Date	Full Time	Part Time	Reason for Leaving:

Employer				Address
Your Title				Supervisor's Name/Phone
Begin Date	End Date	Full Time	Part Time	Reason for Leaving:

Employer				Address
Your Title				Supervisor's Name/Phone
Begin Date	End Date	Full Time	Part Time	Reason for Leaving:

Employer				Address
Your Title				Supervisor's Name/Phone
Begin Date	End Date	Full Time	Part Time	Reason for Leaving:

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### Certification, Authorization, and Release

If you advance in the application process, the District completes a comprehensive pre-employment background evaluation which may include, depending on the position applying for: criminal, driving, medical/physical, drug screen, thorough personal and professional reference check, and physiological screening.

By my signature below, I certify that all information I provided as part of this application process is true and complete to the best of my knowledge and that I understand that any misstatement of fact *may* result in my disqualification from consideration for employment.

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Signature

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Date

Mail, deliver, or email completed application packet, which consists of an application, cover letter, resume, and a copy of certificates for "minimum and desirable qualifications" to:

**Applegate Fire District**  
**Attn: Deputy Chief Dave Blakely**  
**1095 Upper Applegate Road**  
**Jacksonville, OR 97530**

Email to: [applications@applegatefd.com](mailto:applications@applegatefd.com)

**Faxed applications will NOT be accepted.**