

# S. E. THURSTON FIRE AUTHORITY

**Rainier Yelm**

709 Mill Road  
Post Office Box 777

Yelm, Washington 98597

(360) 458-2799

Fax (360) 458-2766



## Employment Application

Please type or print in ink

<b>Application Type</b> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">Circle One</span>	Date _____ / _____ / _____
<b>Firefighter/EMT</b>	<b>Admin Positions</b>
Other _____	

### Personal Data

Name (Last, First, Initial)	DOB: _____	SSN: _____
Street Address	City _____	State/Zip _____
Mailing Address (if different)	City _____	State/Zip _____
Email Address		
Driver's License No. and State	Home Phone _____	Cell Phone _____
Have you ever been convicted of a misdemeanor or felony crime? (Conviction is not an automatic bar to employment)		
Yes If yes, please explain date, charge, place and action taken: (Use back of page if necessary)		
No		

### Education

School Name and Location (attach additional sheet if more space is needed)	Number of years	Did you graduate?	Course of Study/Degree
High School			
College			
Other			
List Licenses, Certificates or Registrations	Where Issued	Issue Date	Expiration Date

### References (Please do not list relatives)

Name	Address	Phone _____-_____-____
Name	Address	Phone _____-_____-____
Name	Address	Phone _____-_____-____

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**Employment and/or Volunteer History:** Start with current/last position held. Attach additional pages if necessary. You may attach a resume, but this section must be completed.

Company Name: _____	Employed (Month/Year)			
Company Address: _____	From:			
Phone ____-____-____	To:			
City State Zip	Reason for leaving:			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Okay to Contact?</td> </tr> <tr> <td style="padding: 2px;">YES NO</td> </tr> <tr> <td style="padding: 2px;">Your Title:</td> </tr> </table>	Okay to Contact?	YES NO	Your Title:	Monthly Salary:
Okay to Contact?				
YES NO				
Your Title:				
Specific Duties: _____				
Immediate Supervisor: _____	Number Employees Supervised: _____			

Company Name: _____	Employed (Month/Year)			
Company Address: _____	From:			
Phone ____-____-____	To:			
City State Zip	Reason for leaving:			
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## Special Skills

If you have other skills obtained through hobbies, volunteer work, etc., relevant to the position for which you are applying, please describe:


## Software

List software you are proficient in that would be relevant to the position for which you are applying:


## Languages

List any languages other than English that you speak fluently:

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## Preferences

Do you qualify for Veterans' Preference? (if yes, please attach copy of DD214)	YES	NO
Have you previously claimed veterans' preferences and been appointed to a position with a county, municipal government, or other political sub-division of the state?	YES	NO
Are you currently receiving veterans' retirement payments or other survivors' benefits?	YES	NO
Are you currently a member of S. E. Thurston Fire Authority?	YES	NO

I hereby declare the information provided by me in this Application is true, correct, and complete to the best of my knowledge. I understand that if I am selected to be a member, any misstatement or omission of fact on this Application shall be considered cause for dismissal. I authorize investigation of all statements in this Application.

I authorize all previous employers to furnish employing agency my record, reason for leaving, and all information they may have concerning me and I hereby release them and the employing agency from all liability or any damage whatsoever arising therefrom.

I understand that membership/employment with S. E. Thurston Fire Authority is at will. This means that both I and S. E. Thurston Fire Authority are free to terminate the employment relationship at any time, with or without cause or advance notice, and without compensation except for time actually worked, provided the termination is not done for a discriminatory reason in violation of the law.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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## S. E. THURSTON FIRE AUTHORITY IS AN EQUAL OPPORTUNITY EMPLOYER

You may use the back of this page to provide additional information, if needed.

### Driving Record Information

Please list all traffic violations and collisions for the past five (5) years:

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List all convictions, warrants:

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**Please attach copies of the following documents (where applicable)**

- o Drivers License
- o High School Diploma
- o College Degree

*You may include copies of any additional documents/certifications that you feel may be pertinent to your application.*