



**APPLICATION FOR EMPLOYMENT**  
**Cascade Rural Fire Protection District**  
**P.O. BOX 825**  
**CASCADE, ID 83611**  
**(208) 382-3200**

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_  
Street City State Zip

Telephone #: \_\_\_\_\_ Mobile/Cell/Other: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Position(s) Applied For: \_\_\_\_\_

Referral Source: \_\_\_\_\_

May we contact you at work? YES  NO  If yes, work# and best time to call: \_\_\_\_\_

Have you applied with, or been previously employed by Cascade Rural Fire Protection District? YES  NO   
If yes, give date(s) and position(s)  
\_\_\_\_\_

Are you legally eligible for employment in this country? YES  NO

Type of employment desired: Full-Time  Part-Time  Volunteer

If explained to you, are you able to meet attendance requirements of the position? YES  NO

Driver's License # \_\_\_\_\_

(Many jobs will require driving a District vehicle for various reasons).

(Answering "Yes" to the following question does not automatically constitute bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.)

Have you ever pled "Guilty" or "No Contest" to, or been convicted of a crime? YES  NO  If yes, please provide details and dates: (Can use extra page if necessary) \_\_\_\_\_

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\*Applicants are subject to pre-employment drug and alcohol screening, along with a background check.

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## EMPLOYMENT HISTORY

Starting with your most recent employer, provide the following information. (Add pages as needed)

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Employer	Telephone #
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Street Address	City	State	Zip
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Immediate Supervisor and title  
May we contact for reference? Yes  No  Later

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Why did you leave?

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Summarize type of work performed and job responsibilities:

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Dates Employed From:	To:
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Employer	Telephone #
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Street Address	City	State	Zip
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Immediate Supervisor and title  
May we contact for reference? Yes  No  Later

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Why did you leave?

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Summarize type of work performed and job responsibilities:

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Dates Employed From:

To:

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Employer

Telephone #

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Street Address

City

State

Zip

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Immediate Supervisor and title

May we contact for reference? Yes  No  Later

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Why did you leave?

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Summarize type of work performed and job responsibilities:

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Dates Employed From:

To:

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Explain any gaps in your employment, other than those due to personal illness, injury or disability.

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If not address previously, have you ever been fired or asked to resign from a job? Yes  No

If yes, please explain: \_\_\_\_\_

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List current and previous held licenses and certifications related to Fire and EMS.

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**EDUCATIONAL BACKGROUND**

Starting with your most recent school attended, provide the following information. High School and above only.

School (Include City and State)	Years Completed	Degree/Diploma/Certification	GPA	Major/Minor

**REFERENCES**

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Relationship to you	Telephone#	No. of years known

Is there any other job-related information you want us to know about you?

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## **APPLICANT STATEMENT**

I certify that all information I have provided in order to apply for and secure work with Cascade Rural Fire Protection District is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law. I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application unless specific arrangements are made with Cascade Rural Fire Protection District to continue holding this application current.

If I am hired by Cascade Rural Fire Protection District, this application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's Board of Commissioners and approved by their legal counsel.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to 1) eliminate me from further consideration for employment, and/or 2) may result in my immediate discharge from the employer's service, whenever it is discovered.

### **DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_