

# APPLICATION FOR EMPLOYMENT



## Golden Valley Fire District

749 S Egar Road, Golden Valley, AZ 86413  
 Phone: 928-565-3479  
 Website: [www.goldenvalleyfire.org](http://www.goldenvalleyfire.org)  
 Email: [gvfd@goldenvalleyfire.org](mailto:gvfd@goldenvalleyfire.org)

## Northern Arizona Fire District

2600 E Northern Ave, Kingman, AZ 86409  
 Phone: 928-757-3151  
 Website: [www.northernazfire.com](http://www.northernazfire.com)  
 Email: [nafd@northernazfire.com](mailto:nafd@northernazfire.com)

### APPLICANT INFORMATION

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

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

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Position Applied for: \_\_\_\_\_  Full-time  Part-time  Volunteer/Trainee  
Circle one

Date Available: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Are you 18 years of age or older?  Yes  No If no, when will you be 18? \_\_\_\_\_  
 Do you possess a valid driver's license?  Yes  No If yes, what state? \_\_\_\_\_  
 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 GVFD or NAFD?  Yes  No If yes, which district and when? \_\_\_\_\_  
 Have you ever been convicted of a felony?  Yes  No If yes, explain: \_\_\_\_\_

### EDUCATION

High School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No Diploma  GED

College: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No Degree: \_\_\_\_\_  
Attach copy

Other Training: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No Certificate: \_\_\_\_\_  
Attach Copy

Other Training: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate?  Yes  No Certificate: \_\_\_\_\_  
Attach Copy

**EDUCATION (CONT.)**

In the space below, list any additional training you have acquired that might apply to the position you are applying for. List course or training name, description of training, who provided training, any certificate issued and dates. Attach copies of any certificates earned.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

*Please list three professional references.*

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 this employer for a reference?  Yes  No

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

**PREVIOUS EMPLOYMENT (CONT.)**

Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Yes No

May we contact this employer for a reference?  Yes  No

**MILITARY SERVICE**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**DISCLAIMER and SIGNATURE**

I certify that the information provided in this application is true and complete to the best of my knowledge.

If this application leads to employment, I understand that false, misleading, incomplete information in my application or interview may result in termination of employment.

Signature \_\_\_\_\_ Date \_\_\_\_\_