



Orange Township Fire Department

7700 Gooding Blvd, Delaware, OH 43015
 (An Equal Opportunity Employer)

Date Submitted _____ Time _____ Number _____

Name _____ Date _____
Last First Middle

Social Security # _____ Are you 18 years or older? YES () NO ()

Address _____

Telephone: _____
Work Home Cell

Position Applying: _____ Full-Time () or Part-Time ()

EDUCATION	NAME OF SCHOOL	TYPE OF DEGREE OR CERTIFICATE	CIRCLE GRADE COMPLETED
HIGH SCHOOL LAST ATTENDED			9 TH 10 TH 11 TH 12 TH
COLLEGE, UNIVERSITY, OR TECHNICAL SCHOOL			1 2 3 4
COLLEGE, UNIVERSITY, OR TECHNICAL SCHOOL			1 2 3 4
ATTENDING SCHOOL NOW:			1 2 3 4
OTHER: EMT, EMT/A EMT/P, ETC.			1 2 3 4



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EMPLOYMENT RECORD (list most recent employer first)

Present Employer: _____ Phone#: _____
Address: _____ May we contact? _____
Salary: _____ Dates employed: _____ Supervisor: _____
Title & Duties: _____
Reason for Leaving: _____

Previous Employer: _____ Phone#: _____
Address: _____ May we contact? _____
Salary: _____ Dates employed: _____ Supervisor: _____
Title & Duties: _____
Reason for Leaving: _____

Previous Employer: _____ Phone#: _____
Address: _____ May we contact? _____
Salary: _____ Dates employed: _____ Supervisor: _____
Title & Duties: _____
Reason for Leaving: _____

Previous Employer: _____ Phone#: _____
Address: _____ May we contact? _____
Salary: _____ Dates employed: _____ Supervisor: _____
Title & Duties: _____
Reason for Leaving: _____

Special Skills: _____

List Office Equipment you can operate: _____



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Criminal Record: Have you been convicted of any crimes, other than traffic violations?

Yes () No () If yes, please describe: _____

(You will not necessarily be denied employment solely because of a conviction record.)

Have you been convicted of any moving traffic violations?

Yes () No () If yes, please describe: _____

(You will not necessarily be denied employment solely because of a conviction record.)

Firefighter Applicants Only: Training Certificate. For appointment as a firefighter, pursuant to the Ohio Revised Code 505.38, an applicant is required to have, a certificate issued by the State Board of Education under Ohio Revised Code 3303.07 evidencing his or her satisfactory completion of a firefighter training program. Do you have such an up-to-date certificate? Yes () No ()

If yes, number of hours certified: _____

Do you have a certificate of accreditation as an Emergency Medical Technician-Paramedic, pursuant to Ohio Revised Code 3303.15 or 3303.16? Yes () No ()

References: Give the names of three persons not related to you whom you have known for at least one year.

NAME	ADDRESS	BUSINESS	PHONE
1.			
2.			
3.			

Physical Record: Do you have any physical or medical conditions that would preclude you from performing any work for which you are being considered? Yes () No ()

If yes, please describe: _____

What can be done to accommodate your limitation? _____

(Ohio law prevents discrimination based on handicap)

Name(s) and telephone number(s) to contact in case of emergency:



Orange Township Fire Department

Notice

It is the fundamental policy of Orange Township to provide equal opportunity in all of its operations and in all areas of employment practice and to assure that there shall be no unlawful discrimination against any employee or applicant for employment on the grounds of race, color religion, sex, national origin, age, or handicap. We request that any resume or information submitted not include information indicative of race, color, religion, sex, national origin, or age.

“ I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand and agree that, if employed, falsified statements on this application, whether or not job related, shall be grounds for immediate dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing the same to you.

I understand and agree that, if hired, my employment and my continued employment are conditioned on my authorizing the township to receive information from the Ohio Bureau of Motor Vehicles relating to my driving record, and any traffic violation points, pursuant to Ohio Revised Code 4507.40, that I have accumulated. Accumulation of more than 6 such points during any 24-month period may, in the sole discretion of the Orange Township Board of Trustees, be grounds for immediate dismissal.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time, with or without cause, for any reason or no reason at all, and without any prior notice, except that after successful completion of a 12 month probationary period firefighters may only be terminated as provided by sections 733.35 to 733.39 of the Ohio Revised Code. The 12 month probationary period shall commence as soon as the newly hired firefighter has received the certification required under Ohio Law for the position filled and during the 12 month probationary period firefighters are employees at will and may be terminated at any time with or without cause, for any reason or no reason at all and without prior notice.

Signature: _____ Date: _____

Completed applications must be received no later than _____

Please mail to: Orange Township Fire Department
7700 Gooding Blvd
Delaware, Ohio 43015

DO NOT WRITE BELOW THIS LINE

Interviewed by: _____ Date: _____

Hired: Yes () No () Position: _____ Department _____

Salary/Wage: _____ Date reporting for work: _____

Approved: 1. _____
2. _____
3. _____