



Mooresville Fire Department

Employment Application



Applicant Information

Full Name: _____ Date of Birth: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Drivers License # : _____ State: _____ Expiration Date: _____

Position Applied for: _____

Are you a citizen of the United States? YES NO PSID # _____

Have you ever applied for a position here before? YES NO If yes, when? _____

Have you been convicted of a felony? YES NO

If yes, explain: _____

Type of Employment Requested Full Time Part Time

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three personal references, not related to you.

Full Name: _____ Years known: _____

Address: _____ Phone: _____

Full Name: _____ Years known: _____

Address: _____ Phone: _____

Full Name: _____ Years known: _____

Address: _____ Phone: _____

Current Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

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

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

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

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Previous Employment cont.

Company: _____ Phone: _____

Address: _____ Supervisor: _____

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

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Certifications

List all applicable certifications:

Disclaimer and Signature

I, the undersigned, certify that the information contained on this document to be true to the best of my knowledge. I understand that efforts will be made to verify the information. I further understand that falsification of information may result in elimination from further consideration for employment. If falsification herein is discovered after employment with the Mooresville Fire Department, it may result in termination of that employment.

Signature: _____ Date: _____