

# POTTER COUNTY FIRE RESCUE

APPLICATION FOR EMPLOYMENT  
PLEASE COMPLETE ALL ITEMS

For office use only

Starting date: \_\_\_\_\_

Station: \_\_\_\_\_

## PERSONAL HISTORY

Last name	First	Middle	Date of birth
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Street	Apt. #	Have you filed an application here before? Yes _____ No _____ Date _____
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City	State	Zip Code	Social Sec. #
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Phone # Day	Evening	Alternate
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Driver's license # and Class	List any traffic violations in last 3 years
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Have you ever been convicted of a crime – Class B misdemeanor or above? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

Do you have relatives currently employed here? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, who? \_\_\_\_\_

Have you ever had your professional license or certification suspended or revoked? Yes \_\_\_\_\_ No \_\_\_\_\_

Veteran of U.S. military service? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, which branch? \_\_\_\_\_

Notify in case of emergency: Name \_\_\_\_\_ Address \_\_\_\_\_

Day phone \_\_\_\_\_ Night phone \_\_\_\_\_ Relationship \_\_\_\_\_

## EMPLOYMENT

Are you currently employed? Yes \_\_\_\_\_ No \_\_\_\_\_ Will employer allow you to respond during work hours? Yes \_\_\_\_\_ No \_\_\_\_\_

Name and address of employer \_\_\_\_\_

## REFERENCES

LIST TWO (2) PERSONAL REFERENCES NOT RELATED TO YOU

Name	Address	Years Known	Phone No.

Please list education, skills and/or training you have which are relevant to the position for which you are applying:

Education/Skills/Training

### Pre-Employment Screening

Employers in Texas have a legal duty in regard to each employee's safety. The American's with Disabilities Act requires us to make certain that each employee is capable of performing the central functions of the job. Therefore, you must be honest in regard to your personal evaluation of your ability to perform the essential functions as described below.

The position you are applying for requires walking, standing, kneeling, crawling, lifting, bending, carrying or pulling/dragging heavy loads, utilizing firefighting equipment and rescue tools as well as the ability to communicate verbally and in writing form with supervisors and co-workers. Additionally, the ability to remain calm in emergency situations is required.

In that regard, **do you have the physical and/or mental capabilities to perform with or without reasonable accommodations, the following essential functions of the job?**

- |   |              |
|---|--------------|
| Stand and/or walk for long periods of time  | Yes___ No___ |
| Work in adverse conditions (heat, cold, rain, snow, etc.)                         | Yes___ No___ |
| Lift and carry a minimum of 80 pounds   | Yes___ No___ |
| Read and write English  | Yes___ No___ |
| Twist your torso 90 degrees   | Yes___ No___ |
| Twist head/neck 90 degrees  | Yes___ No___ |
| Climb a ladder and maintain balance   | Yes___ No___ |
| Communicate effectively orally and on a two-way radio                             | Yes___ No___ |
| Capable of distinguishing colors  | Yes___ No___ |
| Mentally alert and capable of remembering names,<br>details and oral instructions | Yes___ No___ |

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Ability to work in confined spaces	Yes___ No___
Ability to wear breathing apparatus	Yes___ No___
Drive day or night and in adverse weather	Yes___ No___
Ability to start and use power tools, saws, etc.	Yes___ No___
Work in personal protective equipment (PPE) for extended periods of time	Yes___ No___
Demonstrate ability to give and receive orders	Yes___ No___

**Applicant’s Certification and Agreement  
(Please read carefully)**

In consideration of being employed, I understand and agree that:

1. If I misrepresent or deliberately leave out a fact in my application, I may be refused employment or, if employed, I may be terminated.
2. Any doctor, hospital or testing laboratory has my consent to conduct medical or drug testing on me, and I hereby give my consent to having all information released for the employer to determine my abilities to perform job duties now or in the future. I also give my consent to physical searches of myself and my brief case, lunch box, car, locker or any packages or purse that I have while on the employer’s premises whether or not I have a lock on such items.
3. The employer is an equal opportunity employer. The employer does not discriminate in employment and no question on my employment application is used for the purpose of limiting or excluding any applicant’s consideration for employment on a basis prohibited by local, state or federal law.
4. I understand that the employer requires all staff to report sanctions, convictions, suspensions, censures or revocation (“sanction”) action taken against them by federal, state, local, or other professional entities. These sanctions may include but are not limited to infractions against professional licensure, criminal history convictions, history of child abuse, etc.
5. I understand that firefighting is a potentially dangerous occupation and understand that any risks that I assume are my own.

**I have read and agree to the above and hereby certify that the facts I have provided in my employment application are true and complete.**

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