

NAME: _____
DATE: _____
TIME: ____: ____ AM / PM



APPLICATION FOR EMPLOYMENT CITY OF ALLEN PARK FIRE DEPARTMENT

Legal Name: _____ Date: _____

IMPORTANT

This application must be filled out completely and submitted to the City of Allen Park Human Resources Department:

By email: hrsearch@cityofallenpark.org

By Mail or In Person: City Clerk's Office 15915 Southfield Road, Allen Park, MI 48101

The following is a summary of the application process expectations:

1. *Print legibly or type.*
2. *This Application constitutes a part of the application process. Any falsification or fraudulent omission of any information or incomplete information in this Application may be grounds for disqualification.*
3. *The City of Allen Park conducts background checks. Failure to disclose felony or misdemeanor convictions will result in disqualification from further employment consideration.*
4. *Current EMPCO or Conference of Western Wayne written examination certification is required, with a score of 75% or better, as well as a current CPAT. In addition to a written examination you will be required to take and pass an oral interview with a score of 75% or better.*
5. *Employment is contingent upon passing a background history examination, a post-offer physical and drug screening examination, as well as a psychological examination.*
6. *Copies of the following must be included with your application:*
 - a. *Firefighter I and II certificates from the Michigan Firefighters Training Council*
 - b. *Hazardous Materials Operations Level certificate from the MFFTC*
 - c. *High school diploma or GED*
 - d. *Birth Certificate and Michigan driver's license*
 - e. *Current State of Michigan Paramedic license and BLS, ACLS cards*
 - f. *Current Conference of Western Wayne or EMPCO, or other comparable testing entity, written and physical agility certificates*
 - g. *Resume*

The City of Allen Park considers all applicants for employment without regard to race, color, religion, sex, national origin, age, disability, or status as a Vietnam-era or special disabled veteran in accordance with federal law. In addition, the City complies with applicable state and local laws prohibiting discrimination in employment in every jurisdiction in which it maintains facilities. The City also provides "reasonable accommodations" to qualified individuals with disabilities, in accordance with the Americans with Disabilities Act and applicable state and local laws.

GENERAL INFORMATION:

(Please type or print legibly)

For Position(s): _____ **Date:** _____

Legal Name: _____
First Middle Last Suffix

Address: _____
Street City State Zip

Email: _____ **Phone:** _____

Social Security # _____ **Driver's License #** _____
State: _____ Expires: _____

Are you legally entitled to work in the United States? -----Yes No
(If hired, you will be required to provide proof of citizenship or immigration status, as required by law.)

Are you over 18 years or older? -----Yes No

Have you ever worked under a different name? -----Yes No

If the answer is yes, please provide name(s) used so employment can be verified:

Can you perform the duties of the position, with or without accommodation? ----Yes No

How did you hear about the position? _____

List the names and relationships of relatives that work for the City of Allen Park: _____

Have you ever been convicted of a felony or misdemeanor? -----Yes No
(A conviction will not necessarily be a bar to employment. The nature and circumstance of a conviction will be considered in any employment related decision.)

Are there any felony charges currently pending against you? -----Yes No

If yes, please explain: _____

Military Service Record: Have you ever served in the U.S. Armed Forces? ----- Yes No

EDUCATION:

	Name & Address	Course of Study	# of Years Completed	Did you graduate?
High School				
College				
Post Graduate				
Business/Trade				
Other				
Extracurricular Activities				

EMPLOYMENT HISTORY:

Have you ever been employed by the City of Allen Park? ----- Yes No

Dates of Employment		Department	Position	Nature of Duties
From	To			

List Below, all previous employers – start with your present or last job. Add additional pages of this form if necessary.

May we contact the employers listed below: ----- Yes No

Employer Name	Address	Phone	Dates Employed	
			From	To
Supervisor (Name and Title)				
Job Title and Duties			Hourly Rate/Salary	
			Starting	Final
Reason for Leaving				

Employer Name	Address	Phone	Dates Employed	
			From	To
Supervisor (Name and Title)				
Job Title and Duties			Hourly Rate/Salary	
			Starting	Final
Reason for Leaving				

Employer Name	Address	Phone	Dates Employed	
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Supervisor (Name and Title)				
Job Title and Duties			Hourly Rate/Salary	
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Reason for Leaving				

Employer Name	Address	Phone	Dates Employed	
			From	To
Supervisor (Name and Title)				
Job Title and Duties			Hourly Rate/Salary	
			Starting	Final
Reason for Leaving				

ACKNOWLEDGEMENT

I understand that answers given herein are true, complete and correct to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ Date: _____

CHECKLIST:

Please check off all of the following required documents included with your application at time of submission:

- Michigan Firefighter I & II certificates
- State of Michigan Paramedic License
- Hazardous Materials Operations Level certificate
- High School Diploma or GED
- Birth Certificate
- State of Michigan Driver's License
- BLS Card
- ACLS Card
- Current CWW or EMPCO written and physical agility certificates
- Resume