

Application for P.I.F.D. Call Volunteer or Per-Diem

Applying for Per-Diem Position

Applying for Regular on Call Volunteer

Date of Application: _____

Last Name First Name Middle Initial

Address: Number Street City State Zip Code

Telephone Number Email Address

Drivers License #: _____ State: _____

Please circle the answers to the following questions:

I am 18 years old or older: YES NO

Have you ever filed an application with us before? YES NO

Have you ever been employed with us? YES NO

May we contact your current employer
as part of our background check? YES NO

Have you been convicted of a crime within
the last 7 years? YES NO

If yes, please explain: _____

When are you available to fill this position? _____

Why do you want to be a member of the Volunteer On-Call Fire Department?

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected class.

1. Employer: _____ Dates Employed: _____
(From - To)

Address: _____ Supervisor: _____

Job Title: _____ Work Performed: _____

Reason for leaving employment: _____

2. Employer: _____ Dates Employed: _____
(From - To)

Address: _____ Supervisor: _____

Job Title: _____ Work Performed: _____

Reason for leaving employment: _____

3. Employer: _____ Dates Employed: _____
(From - To)

Address: _____ Supervisor: _____

Job Title: _____ Work Performed: _____

Reason for leaving employment: _____

4. Employer: _____ Dates Employed: _____
(From - To)

Address: _____ Supervisor: _____

Job Title: _____ Work Performed: _____

Reason for leaving employment: _____

Additional Information

Specialized skills or qualifications: _____

State any additional information that may be helpful to us in considering your application: _____

References

1. Name: _____ Phone: _____

Address: _____

2. Name: _____ Phone: _____

Address: _____

3. Name: _____ Phone: _____

Address: _____

4. Name: _____ Phone: _____

Address: _____

Presque Isle Fire Department
43 North Street, Suite 1
Presque Isle, Me 04769

Applicant's Statement

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize an investigation of all statements contained in this application as may be necessary in arriving at a decision in my possible hiring as a Full-Time Firefighter for the City of Presque Isle or a Volunteer On-Call Firefighter.

I authorize the Fire Chief or a designated Officer of the Fire Department to perform a complete background check to include a criminal history check, driver's license check to confirm an active status as well as driving history.

I authorize the Fire Chief or a designated Officer to interview those individuals listed as references on my application as well any individuals who may be of interest in determining my acceptance as either a Full-Time or On-Call Firefighter of the Presque Isle Fire Department.

Volunteer On-Call Firefighter

I further understand that my acceptance as a Volunteer On-Call Firefighter does not constitute an employment relationship with the City of Presque Isle and that I must abide by all Standard Operating Procedures, Rules and Regulations as they apply to Volunteer On-Call Firefighters.

Date: _____

Print Name:

Signature of Applicant