



## **APPLICATION FOR PART-TIME FIREFIGHTER/PARAMEDIC**

### **MINIMUM REQUIREMENTS FOR PART-TIME FIREFIGHTER/PARAMEDIC:**

- **Applicant must be at least 21 years of age.**
- **Applicant must be State of Illinois certified Basic Firefighter or be enrolled in an approved fire academy.**
- **Applicant must be a State of Illinois licensed EMT-P or EMT-B with one year of experience.**

### **A COPY OF THE FOLLOWING ITEMS MUST BE SUBMITTED WITH YOUR APPLICATION WHEN APPLYING FOR A PART-TIME FIREFIGHTER/PARAMEDIC POSITION:**

- **Valid driver's license**
- **Valid Illinois EMT-P license or EMT-B license**
- **Basic Firefighter certificate or proof of fire academy enrollment**
- **Valid CPR card**

### **Once an applicant is offered part-time employment, it is mandatory they:**

- **Pass a criminal background check.**
- **Complete a pre-employment physical by a District approved physician.**
- **If a paramedic, successfully gain entrance into the SCC EMS system.**

# ROBERTS PARK FIRE PROTECTION DISTRICT

## PART-TIME EMPLOYMENT APPLICATION

### APPLICANT INFORMATION

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ D/L Number: \_\_\_\_\_

Position Applied for:  Part-Time Firefighter EMT-P  Part-Time Firefighter EMT-B  Clerical  Other

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If so, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

### EDUCATION

High School: \_\_\_\_\_ Location: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

College: \_\_\_\_\_ Location: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Location: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

### REFERENCES

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

**For Office Use Only: Date Submitted** \_\_\_\_\_

**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

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

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: \_\_\_\_\_

**Disclaimer and Signature**

**AT WILL EMPLOYMENT CLAUSE: employment contract provision indicating that employer or employee may terminate the employment relationship at any time with or without cause.**

In consideration of employer entering into this agreement, employee agrees to conform to the policies and rules of employer in effect from time to time. Each party to this agreement also agrees that employee's employment and compensation can be terminated, with or without cause, and without prior notice, at any time, at the option of either employee or employer.

By my signature below, I authorize the Roberts Park Fire Protection District to conduct a criminal history investigation and I understand that any findings of criminal history can terminate the hiring process immediately.

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office Use Only: Department Start Date: \_\_\_\_\_ End: \_\_\_\_\_**