



Copper Canyon Fire & Medical District
 26 B Salt Mine Road
 Camp Verde, AZ 86322
 (928) 567-9401
www.cc-fma.org

Verde Valley Fire District
 2700 E Godard Road
 Cottonwood, AZ 86326
 (928) 634-2578
www.verdevalleyfire.org



Employment Application

Read the following instructions carefully before completing your application for employment:

All requested information must be furnished, including information requested on supplemental questionnaires. Fill in all spaces of the application accurately and completely. If a category does not apply, write N/A for Not Applicable. Do NOT enter the words "see resume" in lieu of completing the information requested. The information you provide will determine your eligibility and qualifications for employment or further examination. All information contained on the application is subject to verification. Any omission, misstatement or falsification may be cause for rejection of this application, removal of your name from an eligibility list or discharge.

Position Applied For: _____ Date: _____

Copper Canyon Fire & Medical District and Verde Valley Fire District are Equal Opportunity Employers. It is the policy of the agencies to make all recruitment, hiring, and placement decisions, as well as other employment decisions, on the basis of the qualifications of the individuals considered for the position to be filled, without regard to race, ethnicity, age, sex, religion, color, national origin, sexual orientation, veteran's status, or non-disqualifying handicap.

Last Name: _____ First Name: _____ Middle Initial: _____

Other names by which you have been known and dates those names were used: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Home Telephone: _____ Message/Cell Telephone: _____

Email Address: _____

Are you at least 18 years of age? Yes No Do you have a legal right to work in the U.S.? Yes No

Have you previously applied for employment with Copper Canyon Fire? Yes No If so, when? _____

Have you previously been employed by Copper Canyon Fire? Yes No If so, when? _____

Have you previously applied for employment with Verde Valley Fire District? Yes No If so, when? _____

Have you previously been employed by Verde Valley Fire District? Yes No If so, when? _____

Are any of your relatives, either by blood or marriage, employed with Copper Canyon Fire? Yes No

If so, who? _____

Are any of your relatives, either by blood or marriage, employed with Verde Valley Fire District? Yes No

If so, who? _____

Do you have, or have the ability to obtain, a valid driver's license? Yes No

Please submit a certified five (5) year driving record from the Department of Motor Vehicles with this application.

Can you perform the essential duties of the position for which you have applied with or without reasonable accommodation?

Yes No

Have you ever served in the U.S. Armed Services? Yes No If so, what branch? _____

Were you given an honorable discharge? Yes No

Are you a member of a National Guard or Armed Forces Reserve Unit? Yes No If yes, identify: _____

Have you ever been discharged or requested or forced to resign from any position? Yes No

If yes, explain: _____

Have you ever been convicted of, or pled "no contest" to any crime, including any misdemeanors (excluding minor or civil traffic infractions)? **(NOTE: A criminal conviction does not constitute an automatic bar to employment. Each case is considered individually and based on job requirements. Criminal history information revealed by the State or FBI that conflicts with the information provided on this application may be grounds for rejection and/or termination from employment.)**

Yes No If yes, explain: _____

Are you pending charges, trial or other court proceedings for any crime, in any jurisdiction, at this time? Yes No

If you answered yes to this question, please give details including the offense(s) for which you are currently pending charges and jurisdiction (court, city, county, and state): _____

Have you ever had any license or certificate of any kind revoked, suspended, placed on probation, or have you in any way been sanctioned by, or is any charge or complaint now pending against you? If you answer yes, you must provide the dates of the proceedings, name, address and telephone number of the agency or licensing body where proceedings took place, a statement of the accusations against you and the final disposition. Yes No

Explanation: _____

Education/Certifications:

Did you receive a high school diploma or obtain a G.E.D.? Yes No

Name of school or program: _____

Mailing address, City, State, Zip: _____

List colleges, universities, trade or business schools attended:

Name: _____

City/State: _____

Major: _____

Degree/Highest Level Completed: _____

Name: _____

City/State: _____

Major: _____

Degree/Highest Level Completed: _____

Firefighter I and II certified? Yes No Attach a copy of certificate(s).

AZ EMT / IEMT / CEP certification? Yes No Attach a copy of certification(s) card.

Training:

List position-related licenses, registrations, certificates, or professional memberships:

Description: _____

Number: _____

Expiration: _____

Description: _____

Number: _____

Expiration: _____

Description: _____

Number: _____

Expiration: _____

Skills:

Do you speak a foreign language? Yes No If yes, what language(s) and to what proficiency?

Fluent Good Fair

Fluent Good Fair

List any skills that you possess relating to the position applying for: _____

Job Experience:

Indicate with an "X" any job experience you've had in the following:

Firefighter

Engineer

Captain

Fire Marshal

Fire Inspector

Technical Rescue

Hazardous Materials

Wildland

Paramedic

EMT

Clerical:

Receivables Payables Payroll Multi-Line Telephone System
 Meeting Minutes Customer Service Filing Writing Correspondence

Computer Proficiency:

Word Excel Access PowerPoint Publisher
 Quickbooks Image Trend Emergency Reporting Other, explain: _____

Employment History:

Starting with your present employer, please list your employment history for the past ten (10) years. Account for all periods of time, including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Please add additional pages if needed.

Current Employer Name: _____ Telephone: _____

Address: _____ City/State: _____ Zip: _____

Starting Position: _____ Supervisor's Name/Position: _____

Starting Date: _____ Starting Salary: _____ Current Salary: _____

May we contact your employer? Yes No If no, when can we contact this employer? _____

List job duties: _____

Reason for leaving: _____

Previous Employer Name: _____ Telephone: _____

Address: _____ City/State: _____ Zip: _____

Starting Position: _____ Supervisor's Name/Position: _____

Starting Date: _____ Starting Salary: _____ Ending Date: _____ Ending Salary: _____

List job duties: _____

Reason for leaving: _____

Previous Employer Name: _____ Telephone: _____

Address: _____ City/State: _____ Zip: _____

Starting Position: _____ Supervisor's Name/Position: _____

Starting Date: _____ Starting Salary: _____ Ending Date: _____ Ending Salary: _____

List job duties: _____

Reason for leaving: _____

Previous Employer Name: _____ Telephone: _____

Address: _____ City/State: _____ Zip: _____

Starting Position: _____ Supervisor's Name/Position: _____

Starting Date: _____ Starting Salary: _____ Ending Date: _____ Ending Salary: _____

List job duties: _____

Reason for leaving: _____

Previous Employer Name: _____ Telephone: _____

Address: _____ City/State: _____ Zip: _____

Starting Position: _____ Supervisor's Name/Position: _____

Starting Date: _____ Starting Salary: _____ Ending Date: _____ Ending Salary: _____

List job duties: _____

Reason for leaving: _____

In submitting this application, I understand that, if offered employment, I will be required to provide proof of identity and eligibility to work in the United States in addition to signing a loyalty oath as a condition to receiving any compensation from either agency. Also, I certify that all statements made on this application are true and complete to the best of my knowledge. I understand that any omission, misstatement, or falsification may be cause for rejection of this application and/or discharge from service. I authorize Copper Canyon Fire & Medical District and Verde Valley Fire District to make all necessary and appropriate investigations allowable by law to verify the information concerning my employment. I authorize all former employers, schools and references to release information that they may have about me to Copper Canyon Fire & Medical District and Verde Valley Fire District or their agents.

I understand that employment, if offered, is contingent upon satisfactory results of a post-offer physical examination, drug screening, criminal background check, motor vehicle report, and employment verification, at the agencies' expense. New hires will be required to provide their fingerprints on a standard, Federal Bureau of Investigation (FBI) applicant card. Fingerprint cards are forwarded to the Arizona State Department of Public Safety and FBI for review. Criminal history information revealed by the State or FBI that conflicts with the information provided on this application may be grounds for rejection and/or termination from employment.

I will comply with and be governed by all federal and/or state laws, and policies, rules, and procedures of both agencies as may be in effect. If requested by the management at any time, I agree, while on agency property, to submit to the search of my person, possessions, cars, or of any locker that may be assigned to me, and I hereby waive all claims for damages on account of such examination.

I may be required to take a physical examination, at company expense, at any time, to determine if I am physically fit for the job I am to perform, including drug testing for probable cause, random testing, or pre-employment screening. I authorize any physician or hospital to release any information to the agencies which may be necessary to determine my ability to perform the duties of a job I am being considered for, prior to employment, or in the future, during employment with either agency, including drug testing information.

I understand that if I am employed, such employment is for an indefinite period of time and that the District can change wages, benefits and conditions at any time.

By signing below, I acknowledge that I have read and understand the above statements. Further, I understand and acknowledge that if a job offer is made, unless otherwise defined by applicable law, I will be an "at will" employee, and may resign at any time or the agencies may discharge me at any time, for any or no reason. It is further understood that the "at will" employment relationship which would be created if I am hired may not be changed by any oral or written communication, unless such change is specifically acknowledged, in writing, by the Fire Board. I understand that no offer or promise of employment has been made by acceptance of this application by Copper Canyon Fire & Medical or Verde Valley Fire District.

Signature: _____

Date: _____