



Application For Employment

Please print or type. The application must be fully completed to be considered. **Please completed each section and include a copy of your Drivers License and Social Security Card.** Please email completed application and any additional materials to careers@centralcrossingfpd.org or deliver to the district office located at 23463 State Highway 39 Shell Knob, MO 65747.

Date of Application: _____

Personal Information

Name		DOB	
Address	City	State	Zip
Phone number	Email address		
Are you legally eligible to work in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If selected for employment are you willing to submit to a background check? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Drivers License #	Social Security #		

Position

Position you are applying for	Available start date	Desired pay
Employment desired <input type="checkbox"/> Volunteer <input type="checkbox"/> Part time/PRN <input type="checkbox"/> Full time		

Education (when submitting application provide all supporting documents)

School name	Location	Years attended	Degree, certificates, licensing	Major

References (business and professional only; that have knowledge of work performance within the last three years)

Name	Title	Company	Phone

Employment History

Employer (1)	Job title		Dates employed
Work phone	Reason for leaving		
Address	City	State	Zip
Employer (2)	Job title		Dates employed
Work phone	Reason for leaving		
Address	City	State	Zip
Employer (3)	Job title		Dates employed
Work phone	Reason for leaving		
Address	City	State	Zip

Signature Disclaimer

APPLICANT STATEMENT I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and sing such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

If I am hired, I understand that I am free to resign at any time, with our without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration, I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

CENTRAL CROSSING FIRE PROTECTION DISTRICT is a drug free work place. At some point during your initial 90 days of employment you could be asked to submit to a blood or other testing.

I the undersigned do hereby give my permission to process a background and a criminal history check prior to being accepted as a member or employee of the Fire District.

Name (please print)	Signature
Date	