





# Bismarck Rural Fire Department

## Application for Paid-On-Call Firefighter

V. Are you now or have you been a member with a volunteer or career fire department? \_\_\_\_\_

If Yes, please list name of organization, address and date of membership: \_\_\_\_\_

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VI. Why do you want to work for Bismarck Rural Fire Department? \_\_\_\_\_

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VII. Occasionally the form of an application blank makes it difficult for an individual to adequately summarize his/her complete background. If you wish, use the space below to summarize any additional information necessary to describe your full qualifications. Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or any other similarly protected status: \_\_\_\_\_

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### EMPLOYMENT HISTORY

List present employer or most recent employer first.

May we contact these employers concerning your qualifications, etc? Yes \_\_\_\_\_ No \_\_\_\_\_

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1. Employer

Address

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Job Title

Supervisor's Name

Phone # (Business)

Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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2. Employer

Address

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Job Title

Supervisor's Name

Phone # (Business)

Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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3. Employer

Address

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Job Title

Supervisor's Name

Phone # (Business)

Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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### CERTIFICATION OF APPLICATION:

I hereby certify that this application contains no willful misrepresentation or falsification and that the information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentation or falsification, my application may be rejected and if appointed, I may be removed from the duties of the position with the Bismarck Rural Fire Department (BRFD). I understand that under Title VII of the Civil Rights Act of 1964 and the North Dakota Human Rights Act, I cannot be discriminated against in employment, including consideration for promotion, for reasons of race, color, religion, national origin, sex or on the basis of age, physical or mental disability. I further understand that this application and other information relating to a position with the BRFD I have furnished are not contracts of employment; also, that any oral or written statements to the contrary are hereby expressly disavowed. The BRFD has my permission to thoroughly investigate my work, medical and personal history which is related to the position with the department. I certify that I will hold no person, corporation or organization liable for giving or receiving information in this investigation.

I further understand that if I am appointed to the BRFD, such a position is for an indefinite period of time, that either I or the BRFD can terminate such appointment at anytime, and that the BRFD can change conditions and/or benefits at anytime.

The BRFD operates continuously and you are expected to perform services in accordance with the policies and procedures of the department.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### RELEASE:

Having made application with the Bismarck Rural Fire Department (BRFD) and desiring them to be informed as to my previous record and character, I hereby authorize the BRFD to investigate my past record and to ascertain any and all information which may concern my record and character, whether same is of record or not, and release my present and past employers, references, and persons whomsoever from any damage because of furnishing said information.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Internal use only

Application Number: \_\_\_\_\_ Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_