ALTOONA FIRE & RESCUE DEPARTMENT

Located in the Altoona Emergency Services Building 1904 Spooner Avenue Altoona, Wisconsin 54720 715-839-2970

ightarrow The City of Altoona is an equal opportunity employer. ightarrow

PERSONAL INFORMATION

NAME (Last, First, N	Aiddle Initial)			SOCIAL SECURITY NO.
ADDRESS		CITY	STA	TE ZIP CODE
DRIVER'S LICENSE NO.		HOME TELEPHONE		CELL
DOB	EMAIL ADDRESS			

EDUCATION

HIGH SCHOOL ATTENDED/ ADDRESS	DATE COMPLETED	LAST GRADE COMPLETED
COLLEGE/UNIVERSITY		
TECHNICAL COLLEGE		
OTHER		

MILITARY SERVICE

Branch of Service	Served (Mo/Yr.) From to	Active Duty Or Reserve?	Highest Grade	Primary Duty Or Training
LIST ANY SPECIAL SCHOOLS/T	RAINING ATTENDED	DURING MILITARY	SERVICE	

EMPLOYMENT HISTORY

(Begin with most recent employment first)

From	То	Empl	Employer Name/Address		
Job Title			Name & Telephone Number of Supervisor		
Job Duties	Job Duties				
Annual Salary/Wages Reason for Leaving		Reason for Leaving			
May We Contact Er	mployer/Supervisor	?	[] Yes [] No		

From	То	Employer Name/Address			
Job Title			Name & Telephone Number of Supervisor		
Job Duties	Job Duties				
Annual Salary/Wages Reason for Leaving					
May We Contact E	mployer/Supervisor	?	[] Yes [] No		

From	То	Employer Name/Address		
Job Title		Name & Telephone Number of Supervisor		
Job Duties				
Annual Salary/Wag	nnual Salary/Wages Reason for Leaving			
May We Contact E	mployer/Supervisor	?? [] Yes [] No		

If additional space is needed, please use a blank sheet of paper.

REFERENCES

(no relatives or present employer)

Name	Home Telephone No.	Work No.	
Address	City	State	Zip
Address	City	State	Zīb
Position/Title/Profession		How Long Have Y	ou Known Individual?

Name	Home Telephone No.	Work No.	
Address	City	State	Zip
Position/Title/Profession		How Long Have You Know	n Individual?

Name	Home Telephone No.	Work No.	
Address	City	State	Zip
Position/Title/Profession		How Long Have	You Known Individual?

SPECIAL SKILLS/TRAINING/CERTIFICATIONS

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ADDITIONAL INFORMATION

Position Applied For				
Employment Desired	[] Full-Time	[] Part-Time	[] Temporary	
Are you at least 18 years old?			[] Yes	[]Nø]Nø
Are you a United States citizen?	,		[] Yes	[] No
Do you have a high school diplo	oma, GED or HSED?		[] Yes	[] No
Are you now or were you ever e If yes, attach separate sheet with			[] Yes	[] No
Are you prohibited by state or fe	ederal law from possessing a f	ïrearm?	[] Yes	[] No
	details.	ic bar to employment and will only be o	[] Yes	[] No to the job in
question.	in driver's license or a valid d	river's license from another state?	[] Yes	[] No
		State:		
Are you presently certified/certi	fiable as a firefighter/EMT by	the State of Wisconsin?	[] Yes	[] No
Is there any other information, a application for employment?	pplicable to this position, you	wish to have considered as part of your	[] Yes	[] No
If yes, attach separate sheet with	details.			

GENERAL

COMPLETE IF INSTRUCTED TO DO SO BY EMPLOYING AGENCY.

Attach no more than one additional page for each answer.

- A. Why have you chosen to apply for this position?
- **B.** Discuss things you have done which have contributed to your life experience. Be sure to include information regarding volunteer work with civic, school, or professional organizations. Be specific about names and dates.
- **C.** Why do you believe you could relate to and/or work with people of different races, genders, cultures, ages, socio-economic groups, and educational levels?

RESIDENCY REQUIREMENT

I understand that residency restrictions will be determined based on emergency response and availability factors inherent with the fire service. For these reasons, the Police and Fire Commission will determine during the employment evaluation process whether a candidate's residence is within reasonable parameters.

Applicant Signature:	_ Date:
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APPLICANT - PLEASE READ CAREFULLY AND DATE AND SIGN BELOW

Information provided and statements made by me in this application are true and complete to the best of my knowledge.

I understand that, if I am employed by the City, false information provided or false statements made as part of this application may be considered as cause for dismissal.

I also understand, that if accepted as an employee with the City of Altoona Fire department, there will be an 18-month probationary period. I understand that I will also be required to attend all meetings, schools and training sessions in compliance with Altoona Fire Department Standard Operating Guidelines and as assigned. I declare that I will remain up to date on my training and skills, delivering these skills and services for the benefit of the City of Altoona and the Altoona Fire Department.

Applicant Signature:

Date: _____

Date Application Received:	Reviewed By:	
Comments:		