

MONTECITO FIRE PROTECTION DISTRICT
EMPLOYMENT APPLICATION, Page 2

If yes: Month & Year _____

6. Please give an accurate and complete full-time and part-time employment record. Start with present or most recent employer.

Company Name	Phone Number + Area code
Address	Dates employed (mo/yr)
Name of Supervisor	Weekly Pay
Job Title & Description of Duties	Reason for leaving
Company Name	Phone Number + Area code
Address	Dates employed (mo/yr)
Name of Supervisor	Weekly Pay
Job Title & Description of Duties	Reason for leaving
Company Name	Phone Number + Area code
Address	Dates employed (mo/yr)
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Job Title & Description of Duties	Reason for leaving

7. EDUCATION

SCHOOL	NAME & LOCATION	COURSE OF STUDY	# OF YRS. COMPLETED	DID YOU GRADUATE	DEGREE DIPLOMA
HIGH					
COLLEGE					
OTHER					

8. Membership(s) in professional or civic organizations? (Please exclude those which may disclose your race, color, religion, national origin, creed, sex, marital status, age or ancestry.)

9. Other training you have received, such as work training programs, etc.

Type of Training	Location	# of Hours	Dates Attended
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10. Licenses or professional certificates:

11. Give two (2) references of persons, other than former employers or relatives, who would have knowledge of your qualifications:

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Name Address Phone# Occupation

Name Address Phone# Occupation

12. Have you ever been discharged from any position? _____ If yes, explain:

13. If hired, can you furnish proof of your identity and authorization to work in the United States?
Yes _____ No _____

14. What was your previous address? _____

How long at present address? _____ How long at previous address? _____

15. Are you over 18 years of age? _____

16. Have you ever been bonded? Yes _____ No _____ If yes, with what employer(s)?

17. Have you been convicted of a crime in the past ten years (excluding misdemeanors and summary offenses) which has not been annulled, expunged or sealed by court? Yes _____ No _____ If yes, describe in full:

18. State names of relatives and friends working for us, other than your spouse:

19. Can you perform the duties set forth in the job description?

Yes _____ No _____

20. Will you need some accommodation to perform the duties?

Yes _____ No _____

21. I hereby declare the information provided by me in this application for employment is true, correct and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal. I authorize you to verify all information contained in this application and in any supporting documents submitted by me. I understand a conviction record check may be requested to verify the information contained in this application. I understand that employment is for an indefinite and unspecified duration, at the mutual consent of Employee and the

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District and can be terminated "at will" by the Employee or District at any time without notice and without cause.

Signature

Date