



Spokane County Fire District 8

Application Process and Instructions

Thank you for your interest in Spokane County Fire District 8. In order to accurately and efficiently complete the application process, please follow the instructions provided below.

The following forms must be complete and included:

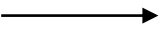
1



Application Form

**Indicate the position/s you are applying for
Remember to sign your application**

2



Required Training Documentation / Resume

**Attach documentation of training and/or certifications
Attach a current resume**

3



Abstract of Driving Record

**The applicant must provide a copy of their drivers abstract
which may be obtained through the Department of Licensing**

Applications must be delivered or mailed to:

Spokane County Fire District 8
Human Resources
P.O. Box 345
12100 E. Palouse Highway
Valleyford, Washington 99036-0345

Questions may be directed to 509-926-6699

SPOKANE COUNTY FIRE DISTRICT 8



APPLICATION FOR EMPLOYMENT



APPLICATION FOR EMPLOYMENT

Spokane County Fire Protection District 8

PO Box 345

12100 East Palouse Highway

Valleyford, WA 99036

(509) 926-6699

Position/s applying for: **Lateral Firefighter/Paramedic-Career**

Name: _____
(In Full) Last First Middle

Physical Address: _____
Street City State Zip Code

Mailing Address: _____
Street City State Zip Code

Telephone Number: (____) _____ Alternate Number: (____) _____

E-mail Address: _____

Have you ever filed an application with us before? ___ Yes ___ No If yes, give date _____

Have you been employed with us before? ___ Yes ___ No If yes, give date _____

May we contact your current employer? ___ Yes ___ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
___ Yes ___ No

(Proof of citizenship or immigration status will be required upon employment)

On what date would you be available to work? _____

Have you been convicted of a felony within the last seven (7) years? ___ Yes ___ No
(Conviction will not necessarily disqualify an applicant from employment.)

If required for this position, do you have a valid driver's license ___ Yes ___ No

For Internal Use Only:

	Date/Time Received	Required Documents	Disposition	
Updated: 11-8-07				

Education

	Name and Address of School	Course of Study		Diploma Degree
Elementary School				
High School				
Undergraduate School				
Graduate School				
Other (Specify)				

Describe any specialized training, apprenticeship, skills or extra-curricular activities you believe to be relative to the position you are applying for.

Describe any job-related training in the United States Military.

Employment Experience

Beginning with your most recent or current employment

Employer:		Dates Employed		Work Performed
		To	From	
Address:				
Telephone Number(s):		Hourly Rate/Salary		
		Starting	Final	
Job Title:	Supervisor:			
Reason for Leaving:				
Employer:		Dates Employed		Work Performed
		To	From	
Address:				
Telephone Number(s):		Hourly Rate/Salary		
		Starting	Final	
Job Title:	Supervisor:			
Reason for Leaving:				
Employer:		Dates Employed		Work Performed
		To	From	
Address:				
Telephone Number(s):		Hourly Rate/Salary		
		Starting	Final	
Job Title:	Supervisor:			
Reason for Leaving:				

Attach any additional employment experience

Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience relative to the position you are applying for.

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.

Yes No

References (with a work relationship)

1. _____ (_____) _____
(Name) Phone Number

(Address)

2. _____ (_____) _____
(Name) Phone Number

(Address)

3. _____ (_____) _____
(Name) Phone Number

(Address)

Applicant's Statement

I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.

I authorize any of the persons and organizations listed on this application to give you any and all information concerning my previous employment, education, and qualifications for employment. I also authorize you to request and receive such information.

In consideration for my employment, I agree to conform to the rules and regulations of the District. I acknowledge that rules may be changed, withdrawn, added or interpreted at any time, at the District's sole option and without prior notice to me.

I also acknowledge that, unless otherwise defined by applicable law or contract, any employment relationship with this organization is of an "*at will*" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "*at will*" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. I understand that no representative of the District has any authority to enter into any agreement for employment for any specified period of time or to promise any other personnel action, either before or after I accept employment, or to guarantee any benefits or terms or conditions of employment or to make any other agreement which is contrary to this agreement.

I have read and understand this agreement.

Signature of Applicant

Date



Spokane County Fire Protection District No. 8 Equal Employment Opportunity Information

Spokane County Fire District 8 is an Equal Opportunity Employer. The provided information will be detached from your application and kept confidential, used only for statistical reports and other lawful purposes. The information you provide will be used to monitor the Districts recruitment and selection practices.

THIS FORM IS VOLUNTARY AND WILL NOT IMPACT ANY EMPLOYEMENT DECISION

1. Date of Birth _____
2. Sex (check one): Male Female
3. Race/Ethnicity - Please check the one category which best describes your recognition in your community:
 - White** (not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
 - Black or African American** (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.
 - Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
 - Native Hawaiian or Other Pacific Islander** (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
 - Asian** (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
 - American Indian or Alaskan Native** (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
 - Two or More Races** (Not Hispanic or Latino) - All persons who identify with more than one of the above five races.
4. Do you have a disability? Yes No. If yes, please check the type of impairment you have:
 - Hearing Mental
 - Mobility Multiple Disabilities
 - Visual Other (specify): _____
5. Veteran Status: Check the one box that best describes your veteran status:
 - Disabled Vietnam Era Veteran Vietnam Era Veteran
 - Disabled Veteran of Other Campaign or War Era Veteran of Other Campaign or War Era
 - Other Disabled Veteran Other Veteran
6. Where did you first learn of this position?
 - Newspaper ad / journal ad Community Organization
 - Friend/family member / internal Fire District 8 Website
 - Road side Signs TV / Public Service Announcement
 - Radio
 - Other (please specify): _____