

Name: \_\_\_\_\_ Date Received: \_\_\_\_\_

# Application Form



Submit to the address below or mail to:

Fire District #1- Johnson County, Kansas  
Attention: Administrative Services  
490 New Century Parkway  
New Century, KS 66031

Name: \_\_\_\_\_

**Personal Information**

Name: \_\_\_\_\_

I am over 18 years of age \_\_\_ Yes \_\_\_ No

I am eligible to work in the United States \_\_\_ Yes \_\_\_ No

(Proof of eligibility will be required upon Job Offer)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Previous address, if you have been at your present address for less than two years.

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Work Phone \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Have you ever been convicted of **ANY** criminal offense (including moving violations)? \_\_\_ Yes \_\_\_ No

If yes, Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Education**

Highest level of education completed: \_\_\_\_\_

High School	Vocation/Trade School	College/University
Name:		
City/State:		
Year Graduated:		
Are/Degree/Diploma:		

**Military**

Branch:	Highest Rank:	Dates:	Assignments:
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**Public Safety Experience**

I have previously served with a fire department/district? \_\_\_ Yes \_\_\_ No If yes list below.

Department Name: \_\_\_\_\_ Address: \_\_\_\_\_



## References

List three references you have known for at least two (2) years. Do not list relatives or previous employers.

Name/Address	Day Phone/ Evening Phone	How long have you known

I certify that the information provided herein is true and complete to the best of my knowledge. I authorize the investigation and verification of all statements and information contained in this application as may be necessary in arriving at an employment/ membership decision. In the event that membership/ employment is approved, I understand that false or misleading information given in my application or interview(s) may result in disciplinary action up to and including termination. I also understand, that I will be required to abide by all rules and regulations of Fire District#1 Johnson County Kansas.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date