

**Application for Employment
Isanti Fire District**

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|--|--|---|-------------------------------|
| Position Applied For | Date of Application | Date Available for Work | |
| Last Name | First Name | Middle Name | Social Security Number |
| Are You Over the Age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Date of Birth _____ | | Home Phone | Other Phone |
| Street Address | | City | State and Zip Code |
| Driver's license number and information | | | |
| Number _____ State _____ Class _____ | | | |
| <i>Education:</i> | | | |
| Did you graduate from High School or receive a GED? | | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No School Attended _____ | | | |
| Years of education completed (circle one) 7 8 9 10 11 12 13 14 15 16 17 18+ | | | |
| Names and Locations of colleges, universities, tech schools | Graduate? | Course of Study | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| <i>Employment History:</i> | | | |
| Employment Firm | | | |
| Address | | <i>Length of Employment</i> | |
| Phone Number | Supervisor | From (month) | To (month) |
| Your Title/Position | | Total Length of Employment | |
| Principal Responsibilities: | | Reason for Leaving | |
| | | May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
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| Employment Firm | | | |
| Address | | <i>Length of Employment</i> | |
| Phone Number | Supervisor | From (month) | To (month) |
| Your Title/Position | | Total Length of Employment | |
| Principal Responsibilities: | | Reason for Leaving | |
| | | May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Employment Firm | | | |
| Address | | <i>Length of Employment</i> | |
| Phone Number | Supervisor | From (month) | To (month) |
| Your Title/Position | | Total Length of Employment | |
| Principal Responsibilities: | | Reason for Leaving | |
| | | May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Other: | | | |
| Relevant current professional memberships, registrations, licenses, etc. Include dates when first issued. | | | |
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| Describe any additional experience or training that qualifies you for this job. | | | |
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Have you been convicted of a misdemeanor, gross misdemeanor, or felony? Yes No If "yes", please explain.

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If you are hired for this position, you will be required to undergo physical agility and mental aptitude tests at the employer's expense to determine whether or not you are able to perform the duties of the position in an effective and safe manner.

References:

Give names of 3 people other than relatives who can be contacted regarding your qualifications, work habits and character.

| Name | City, State | Telephone | Occupation |
|------|-------------|-----------|------------|
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Isanti Fire District has the right to verify information provided in this application. I am aware I may be discharged if there are any misrepresentations on this application or my resume, or made by me in an interview, which may be discovered now or anytime in the future. False information or misrepresentation may also subject me to the penalty provisions of M.S. 43A.39.

In connection with this application for employment, I authorize Isanti Fire District and any agent acting on its behalf to conduct an inquiry into any job-related information contained in this application, including, but not limited to my records maintained by an educational institution relating to academic performance such as transcripts. Moreover, I hereby release the Isanti Fire District and any agent acting on its behalf from any and all liability of whatsoever nature by reason of requesting such information from any person.

I declare that any statement in this application or information provided is true and complete and hereby acknowledge that I have read and I understand the information.

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|--------------|-------------------|
| Date: | Signature: |
|--------------|-------------------|

**Mail or fax completed application to:
Isanti Fire District, Attn: Recruiter, PO Box 490, Isanti, MN 55040
Phone/Fax: 763-444-8019**

Office Use Only:

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|-----------------------|------------------------|-------------------|
| Date Received: | Interview Date: | Hire Date: |
|-----------------------|------------------------|-------------------|