

East Alton Fire Department – Wood River Fire Department

Application for Employment

APPLICANT: PLEASE COMPLETE ALL SECTIONS IN FULL

Check the Box for the Fire Department You Wish to Apply For:

☐ Both

☐ East Alton Only

☐ Wood River Only

POSITION APPLIED FOR: **Probationary Firefighter** DATE: ____/____/____

NAME: _____ PHONE: _____
Last First Middle

E-MAIL: _____

ADDRESS: _____ How Long? _____
Number Street Apt.

_____ US CITIZEN? _____
City State Zip

DATE OF BIRTH: ____/____/____ PLACE OF BIRTH: _____

Other names/aliases you have used or been known by (Maiden Name if applicable):

SOCIAL DRIVER'S STATE
SECURITY # ____ - ____ - ____ LICENSE # _____

Current Driver's License Classification _____

Are you able to obtain an Illinois Class B Non CDL Driver's License? ____ Y ____ N

Have you ever applied for a position with a fire department before? ____ Y ____ N

MILITARY TYPE OF YEARS OF
SERVICE ____ YES ____ NO DISCHARGE ____ SERVICE ____

DATES SERVED ____ to ____ BRANCH of MILITARY _____

List ALL previous addresses since age 17. (Include Military addresses):

Street	Apt.	City	Country	State	Date (from-to)
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CONVICTIONS:

In accordance with Illinois State Law, the Wood River and East Alton Fire Departments cannot hire any person who has been convicted of a felony, or a crime involving moral turpitude. (65ILCS 5/10-2.1-6(j)). Additionally Section 10-2.1-6(j) also sets forth a list of misdemeanor offenses which will disqualify an applicant from appointment with a fire department. Have you been convicted of any of the following?

- A. Felony? Yes ___ No ___ If yes, please explain: _____

- B. Misdemeanor? Yes ___ No ___ If yes, please explain: _____

- C. Moving traffic Violation? Yes ___ No ___ If yes, please explain: _____

EDUCATION: (MUST HAVE MINIMUM: High School Diploma or GED)

School	Address	City/State/Zip
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High School _____

College _____

Tech _____

Other _____

Credit Hours

Or degrees attained: _____

REFERENCES: List **5** persons (not relatives) you have known **at least 5 years** who would be familiar with your qualifications and character.

Name	Address	City/State/Zip	(Area Code) Phone	How long Known

EMPLOYERS: List **ALL** previous employers beginning with current or most recent.
(Account for **ALL** periods of unemployment)

Employer	Address	City	State/Zip	Phone #
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Position Held _____ From _____ To _____

Supervisor _____ Reason for Leaving _____

May we contact CURRENT employer for verification Yes [☐] No [☐]

Employer	Address	City	State/Zip	Phone #
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Position Held _____ From _____ To _____

Supervisor _____ Reason for Leaving _____

Employer	Address	City	State/Zip	Phone #
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Position Held _____ From _____ To _____

Supervisor _____ Reason for Leaving _____

Employer	Address	City	State/Zip	Phone #
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Position Held _____ From _____ To _____

Supervisor _____ Reason for Leaving _____

Employer	Address	City	State/Zip	Phone #
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Position Held _____ From _____ To _____

Supervisor _____ Reason for Leaving _____

Employer	Address	City	State/Zip	Phone #
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Position Held _____ From _____ To _____

Supervisor _____ Reason for Leaving _____

Employer	Address	City	State/Zip	Phone #
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Position Held _____ From _____ To _____

Supervisor _____ Reason for Leaving _____

PLEASE RE-READ THIS APPLICATION & YOUR ANSWERS CAREFULLY
BEFORE SIGNING BELOW

Do you know of any reason why you cannot perform the essential functions of a firefighter, with or without reasonable accommodation: Yes [] No [] If yes explain:

Agreement: (READ THE FOLLOWING STATEMENT CAREFULLY)

I hereby affirm that the information provided on this application and accompanying resume (*if any*) is true and complete to the best of my knowledge. I also agree that **FALSIFIED INFORMATION OR SIGNIFICANT OMISSIONS MAY DISQUALIFY** me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize persons, schools, my current employer (*if applicable*), and previous employers and organizations named in this application and accompanying resume (*if any*) to provide any relevant information that may be required to arrive at an employment decision.

Signature

Date