



Application for Employment

(PRE-EMPLOYMENT QUESTIONNAIRE)



PERSONAL INFORMATION

DATE _____

NAME: _____ EMAIL: _____
LAST FIRST MIDDLE

ADDRESS: _____
STREET CITY STATE ZIP

PHONE NUMBER: _____ ARE YOU 18 YEARS OR OLDER? YES OR NO
CIRCLE

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED
IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES OR NO
CIRCLE

DRIVERS LICENSE NUMBER: _____ HAVE YOU EVER BEEN
CONVICTED OF A FELONY?

EMPLOYMENT DESIRED

POSITION: _____ DATE YOU CAN START: _____

ARE YOU EMPLOYED NOW? IF SO MAY WE INQUIRE
OF YOUR PRESENT EMPLOYER?

EVER APPLIED TO THE HARTLAND FIRE DEPARTMENT BEFORE? WHEN:

DO YOU HAVE ANY FIRE/EMT TRAINING?

IF SO, PLEASE LIST ANY TRAINING/SCHOOLING YOU'VE HAD PLEASE LIST ON THE THIRD PAGE.

EDUCATION	NAME AND LOCATION OF SCHOOL	NO. OF YRS. ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE OR TECH SCHOOL				

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH: _____

SPECIAL SKILLS: _____

ACTIVITIES (CIVIC, ATHLETIC, ETC.): _____

U.S. MILITARY SERVICES: _____ RANK: _____

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES: _____

(CONTINUED ON OTHER SIDE)

LAST

FIRST

MIDDLE

FORMER EMPLOYERS: LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH THE LAST ONE FIRST.

DATE MONTH/YEAR	NAME AND ADDRESS OF EMPLOYER	POSITION	REASON FOR LEAVING
FROM			
TO			
FROM			
TO			
FROM			
TO			
FROM			
TO			

WHICH OF THESE JOBS DID YOU LIKE BEST?

WHAT DID YOU LIKE MOST ABOUT THIS JOB?

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	BUSINESS	EMAIL ADDRESS	PHONE	YEARS KNOWN

IN CASE OF
EMERGENCY NOTIFY

NAME

ADDRESS

PHONE

“I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAYBE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE VILLAGE OF HARTLAND’S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANYTIME, AT EITHER MY OR THE VILLAGE OF HARTLAND’S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANYTIME BY THE VILLAGE OF HARTLAND. I GIVE PERMISSION FOR THE VILLAGE OF HARTLAND TO CONTACT THE ABOVE REFERENCES.”

DATE

SIGNATURE

THE VILLAGE OF HARTLAND IS AN EQUAL OPPORTUNITY EMPLOYER.

*This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26, 1991. This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination.

OFFICE USE ONLY

DATE APPLICATION WAS RECEIVED:

RECEIVED BY:

ADDITIONAL INFORMATION:
