



Application for Employment



J.P.B. FIRE SERVICES, INC.

315-725-8907

4675 BURR DRIVE
LIVERPOOL, NY 13088
Return to: Julie@JPBFire.com

John Breh, Owner, President - Services
Juliane Breh, Owner, Vice President - Sales
www.JPBFire.com @JPBFire on facebook

Applicant's Information

First Name _____

Last Name _____

Nickname _____

Driver's License #: _____ State _____

If possible, attach a copy of your driver's license, your abstract will be checked for acceptability.

Social Security Number

_____ - _____ - _____

Phone Number

_____ - _____ - _____
 Work Cell Other

Address _____

Email

Alternate Phone Number

_____ - _____ - _____

Work Cell Other

Recruitment Information

Position Applying For

Available to Work Full-time Part-time Per-Diem

Can you work: Days Evenings Overnights up to 5 days on job at a time
(check all that apply) 10-14-hour shifts Overtime on days off

Other comments/limitations: _____

Career Goals

List what you want to be doing & accomplish in: 1 year, 5 years, 10 years, may be personal goals &/or professional goals. (continue on back as needed)

What days & hours are you available to work? Shifts as early as 6:30am, or late as midnight.

- Mondays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Tuesdays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Wednesdays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Thursdays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Fridays from _____ am / pm (circle one) to _____ am / pm (circle one)

How did you learn about this company and position?

- Job advertisement (identify publication or other media): _____
- Employee referral (identify employee): _____
- Other (please specify): _____

Have you previously worked at our company? Yes No

If yes, under what conditions did you leave employment before? _____

Education

For each level of schooling below, please write the school name, the city and state where it is located, dates attended, your major & minor subjects, & the degree or diploma you received.

High School _____

College 1 _____

College 2 _____

Graduate School _____

Business, Trade, or Other Schools _____

Fire Fighter Training Classes _____

Employment History

Starting with your current or most recent employer, please provide the following information about the last three companies for which you have worked.

Employer 1 (current or most recent)

Company Name _____

Address _____

Dates Employed _____

Job Title(s) Held _____

Job Responsibilities _____

Why did you leave employment? _____

Name of Supervisor(s) _____ Ph: _____

Can we contact this person for a reference? Yes No, why: _____

Employer 2

Company Name _____

Address _____

Dates Employed _____

Job Title(s) Held _____

Job Responsibilities _____

Why did you leave employment? _____

Name of Supervisor(s) _____ Ph: _____

Can we contact this person for a reference? Yes No, why: _____

Fire Department History

Fire Dept. Name(s) _____

Dates as Member _____

Title(s) Held _____

Responsibilities _____

Current Member? Yes No Why did you leave? _____

Name of Reference(s) _____ Ph: _____

Can we contact this person for a reference? Yes No, why: _____

Applicant Consent

Please carefully read the statements below and **initial each one** to indicate that you understand and agree to the terms stated. Then sign this form at the bottom.

_____ I certify that all information I have supplied on this form is correct to the best of my knowledge. I understand that omissions or providing deliberate misinformation will disqualify my application and, if hired, would serve as grounds for dismissal.

_____ I give consent to **J.P.B. FIRE SERVICES, INC.** to contact the employers listed on this form for my employment references. I authorize these individuals to provide truthful information regarding my employment and previous work experience. In doing so, I waive liability against the employers and individuals contacted as my references, provided the information they supply is honest, factual and given without malice.

_____ I hereby authorize my NYS DMV License abstract to be obtained and reviewed by J.P.B. Fire Services, Inc. for evaluation of my employment potential. This may be shared with their insurance providers to determine insurability under current policy. I understand I may check my own abstract at www.mydmv.com at any time for \$7.00.

Applicant's Signature _____ Date _____

Company Purposes Only

Interviewer's Signature _____ Date _____