



**Sumpter Township
Fire Department
20550 Sumpter Rd
Belleville, Michigan 48111
734-461-6201**



Employment Application

Complete every line in print or type. If the question does not apply, place N/A on the appropriate line. Do not leave any space blank. Applicants are responsible for completing the application in its entirety. The use of additional paper to elaborate is acceptable. Failure to complete the application as requested may result in your application being withdrawn from the application process. False statements may void this application or your employment status at any time that such information becomes known to the employer.

Position Applying For: PAID-ON-CALL FIREFIGHTER

Last Name	First Name	Middle Name			
Address: _____					
Number	Street	City	State	Zip	

Social Security Number: _____

Phone# (daytime) _____ (evening) _____

1. Are you authorized to work in the United States? _____
2. Have you ever been discharged or forced to resign from any job? _____
If yes, please explain _____
3. Have you ever been convicted of a crime? _____
If yes, please explain _____
4. Have you ever been party to a civil lawsuit? _____
If yes, please explain _____
5. Have you ever been employed by another name? _____
If yes, what name? _____
6. May we contact your previous employers? _____
7. If currently employed, may we contact your current employer? _____
If no, please explain _____
8. What are your normal work hours at your current employer? _____

9. Driver's License Number _____ State _____ Expiration _____
10. Is the address shown on your drivers license your current address? _____
11. Do you have any impairments (physical or psychological) that would prevent you from performing the duties of a firefighter? _____
If yes, Please explain _____

12. Do you currently/have you ever held a position with Sumpter Township? _____
If yes, please explain. _____
13. List any special interests: _____

14. List any specialized experience/ training/ qualifications/ abilities you may have, which in your opinion, best qualify you for this position:

REFERENCES

List the names, addresses and phone numbers of three reliable people, other than relatives or your past employers who know you well enough to give information about you.

	NAME	ADDRESS	PHONE
1.	_____		
2.	_____		
3.	_____		

EMPLOYMENT HISTORY

Present Employer _____

Address & Phone# _____

Date of Hire _____ Termination Date _____

Starting Salary _____ Ending Salary _____

Position _____

Employer _____

Address & Phone# _____

Date of Hire _____ Termination Date _____

Starting Salary _____ Ending Salary _____

Position _____

Reason for leaving _____

Employer _____

Address & Phone# _____

Date of Hire _____ Termination Date _____

Starting Salary _____ Ending Salary _____

Position _____

Reason for leaving _____

EDUCATION

High School:

Name _____

Address _____

Grade Completed _____

College:

Name _____

Address _____

Date of Graduation _____

Degree Earned _____

Field of Study _____

Additional Education/Training/Degrees: _____

I hereby certify that there are no willful misrepresentations in or falsifications of the above statements and answers to questions. I am aware that should the investigation disclose any misrepresentations or falsifications, my applications will be rejected and I will be disqualified from applying in the future for any position in the service of this community.

Applicant's Signature Date



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AUTHORIZATION FOR RELEASE OF INFORMATION

Name: _____

Race/Sex: _____ **DOB:** _____

Place of Birth (city/state): _____

I, _____ do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the **Sumpter Township Fire Department**, whether the said records are of public, private or confidential in nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions, financial or credit institutions, including credit reports and/or ratings, public utility companies, employment and pre-employment records, real and personal property tax statements and records and other financial statements and records where ever filed, records of complaint, arrest, trial and/or convictions for alleged or actual violations of law, including criminal, civil and/or traffic records, the results of any polygraph examinations, records of complaint of a civil nature made by or against me where ever located, and to include the records and recollections of attorneys at law or of other counsel, whether representing me or another person in any case in which I presently have, or have had an interest.

I reiterate and emphasize that the intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation which may provide pertinent data for **Sumpter Township Fire Department** to consider in determining my suitability for employment by this department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and the sources of information specifically identified herein.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for employment by **Sumpter Township Fire Department**. I understand that all materials pertaining to this background investigation becomes the property of **Sumpter Township Fire Department** and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses, and expenses, including reasonable attorney fees, arising out of or by reason of complying with this request. I further

understand that in the event I am not approved for employment, the sources of confidential information cannot be revealed to me.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

Signature: _____

Address: _____

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Subscribed and sworn before me this:

_____ day of _____, 20____

My commission expires: _____

Notary Signature: _____