



Pioneer Fire Protection District

Employment Application

7061 Mount Aukum Rd. Somerset, CA 95684/P.O. Box 128

(530) 620-4444

Fax (530) 620-4317

Date:		Position (s) applying for	
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Name:	
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Last First Middle

Address:	
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Number Street City State Zip

How Long at address:		Home Phone:		Work Phone:		Cell Phone:	
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Month of Birth:		Day of Birth:		Email:	
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Valid DL #:		Expiration Date:		State Issued Class:		Restrictions:	
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Have you ever been fired, dismissed, terminated, or had an employment contract terminated from any position for performance or for disciplinary reasons?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If yes give details in explanations)
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Explanations:	

Education:	
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Did you graduate from High School? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no do you possess a GED or Equivalent? <input type="checkbox"/> Yes <input type="checkbox"/> No	If not enter the highest grade completed
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Name of School and date completed:

Name & State of University, College or Trade School	Course of Study	Units completed	Graduated	Diploma, Degree, or Certificate
			<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	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	



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List any other certificates:

List Hobbies, Skills or Special Abilities

Employment History

Career position/Paid position

List your work experience for the past 12 years beginning with most recent. Additionally, add any Volunteer related experience or positions.

Volunteer position or Reserve

List your work experience for the past 7 years beginning with most recent. Additionally, add any volunteer related experience or positions.

From	To	Title/Duties	Supervisor Name
Hours Worked WK	Still Employed <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Name	Supervisor Phone #
Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Address	
Reason for Leaving			
Duties (con't)			

From	To	Title/Duties	Supervisor Name
Hours Worked	How Long	Company Name	Supervisor Phone #
Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Address	
Reason for Leaving			
Duties cont			

From	To	Title/Duties	Supervisor Name
Hours Worked	How Long	Company Name	Supervisor Phone #
Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Address	
Reason for Leaving			
Duties (con't)			



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Employment (cont.)

From	To	Title/Duties	Supervisor Name
Hours Worked	How Long	Company Name	Supervisor Phone #
Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Address	
Reason for Leaving			
Duties (con't)			

From	To	Title/Duties	Supervisor Name
Hours Worked	How Long	Company Name	Supervisor Phone #
Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Address	
Reason for Leaving			
Duties (con't)			

From	To	Title/Duties	Supervisor Name
Hours Worked	How Long	Company Name	Supervisor Phone #
Paid <input type="checkbox"/> Yes <input type="checkbox"/> No	Volunteer <input type="checkbox"/> Yes <input type="checkbox"/> No	Company Address	
Reason for Leaving			
Duties (con't)			

Additional; provide a separate sheet with listed information of previous employers

Certification – IMPORTANT- PLEASE READ BEFORE SIGNING – If not signed, this application may be rejected.

I certify under penalty of perjury that the information I have entered on this application is true and complete to the best of my knowledge. I further understand that any false, incomplete or incorrect statements may result in my disqualification from the examination process or dismissal from employment with Pioneer Fire District. I authorize the employers and educational institutions identified on this application to release any information they may have concerning my employment or education to the Pioneer Fire Protection District.

Applicants Signature

Date Signed

Administrative use only

Application Yes/No Reference & Release of Information Yes/No Back Ground Investigation Release Form Yes/No
Employee Rules of Conduct Yes/No (All must be signed)

Date & Time received: _____/_____/_____ Received by: _____ (Print name) Initials: _____



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Please list 3 references other than relatives or previous employers
and 2 professional references (if applying for career position)

Name:		Phone #:		Position:	
Company:		Address:			

Name:		Phone #:		Position:	
Company:		Address:			

Name:		Phone #:		Position:	
Company:		Address:			

(Career positions only; 2 professional references)

Name:		Phone #:		Position:	
Company:		Address:			

Name:		Phone #:		Position:	
Company:		Address:			

Release of Information

As an applicant for a position with the Pioneer Fire Protection District, I am required to furnish information for use in determining my moral, physical, and mental qualifications. In this connection, I authorize release of any and all information that you may have concerning me, including information of a confidential or privileged nature.

I hereby release you, your organization, or others from any liability or damage which may result from furnishing the information requested.

Applicant Signature

Date



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Employee Rules of Conduct

1. Possession of firearms, nonlethal chemical agents or any deadly weapons by District Personnel are forbidden on District property.
2. The use of vulgarity, sexually suggestive comments or gestures, whether intended to be offensive or not, the display of explicit obscene photographs, pictures, or posters or the use of audio/visual equipment to produce such vulgarity will not be permitted when on duty and/or in uniform.
3. Interpersonal relationships during work and standby time are expected to conform to accepted standards of professional conduct free from sexual harassment or displays of affection.
4. The use of intoxicating beverages or dangerous and restricted drugs during work or standby time or appearing on the job or at the stations under their influence will be considered grounds for immediate adverse action.
5. Intoxicating beverages and dangerous and restricted drugs will not be brought into barracks, offices or buildings, nor carried in official vehicles.
6. Lawful orders of supervisors shall be obeyed promptly.
7. All personnel residing in barracks are expected to conduct themselves in a manner that recognizes their responsibility for common courtesy and consideration to others that share the facility. Everyone is expected to be appropriately quiet after lights out.
8. Employees are expected to meet grooming and uniform standards and present a neat, clean, well-groomed appearance at all times. Occasional dirty work is not an excuse for lack of personnel cleanliness.
9. Buildings and grounds will be kept neat, clean and attractive at all times. Beds will be made up in military style each morning before work and be kept in neat condition when not in use.
10. Meals will be served promptly at designated hours except when fires or other emergencies justify a departure from schedule.
11. District property must be used properly and accounted for. Employees have a personal Responsibility in the use and care of tools and equipment. Tools will be cleaned and returned to their proper places after use. No use of district vehicles for personal use



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12. Both male and female employees will be accorded socially acceptable privacy both barracks and field environment. Employees will always respect the rights and privacy of others. This shall include:
- Separate use of restrooms or shower facilities;
 - Appropriate attire for sleeping, exercising, changing into safety clothing or other regular activities where regular uniform is not required; and
 - In areas where both men and women are present, nudity will not be permitted.

Applicant Signature

Date

My signature indicates that I have read, understand, and will comply with these rules.