ESPARTO FIRE PROTECTION DISTRICT, 16960 YOLO AVE ESPARTO, CA 95627/ PO BOX 366 ESPARTO, CA 95627/ (530)-787-3300



ESPARTO FIRE PROTECTION DISTRICT

It is the Mission of the Esparto Fire Protection District to serve our Community, Visitors, and Neighbors with the highest level of service and professionalism. We are committed to the preservation of Life, Property, and Environment through prompt and effective response to all call for service. Our Members will serve with Integrity, Honor, Compassion, and Respect.

Employment Application

Closing D	ate for Application	·						
		А	pplicant l	Informa	ation			
Full Name:						DOB:		
	Last	I	First			M.I.		
Address:								
	Street Address						Apartment/Unit #	
	City					State	ZIP Code	
CDL Numbe	er:	Class:	Expiration	n:		Endorsements	:	
Phone:								
	-							
Date Availal	ble:	Social Secu	Social Security No.:			Desired Salary: <u>\$</u>		
Position App	olied for:							
YES NO Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.					YES	NO		
Have you ever worked for this company?				If yes,	when?_			
YES NO Have you ever been convicted of a felony?								
If yes, expla	in:							
				ation				
High School: Address:								
From:	To:	Did you	u graduate?	YES	NO	Diploma:		
College: Address:								
From:	To:	Did you	u graduate?	YES	NO	Degree:		
Other:			Address					
From:	To:		ı graduate?	YES	NO	Degree:		

References Please list three professional references. Full Name: Relationship: Phone: Company: Address: Relationship: Full Name: Phone: Company: Address: Full Name: Relationship: Company: Phone: _____ Address: Previous Employment Phone: Company: Supervisor: Address: Job Title: Starting Salary:\$ Ending Salary:\$ Responsibilities: _____ To: Reason for Leaving: From: YES NO May we contact your previous supervisor for a reference? Phone: Company: Address: Supervisor: _____ Starting Salary:\$ Ending Salary:\$ Job Title: Responsibilities: _____ To: From: Reason for Leaving: YES NO May we contact your previous supervisor for a reference? Phone: Company: Supervisor: Address: Ending Salary: Job Title: Starting Salary:\$

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Responsibilities:								
From: To:	Reason for Leaving	:						
May we contact your previous supervisor for a reference?	YES NO							
Military Service								
Branch:	From	: To:						
Rank at Discharge:	Type of Discharge:							
If other than honorable, explain:								
Disclaimer and Signature								
I certify that my answers are true and complete to the best of my knowledge.								
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.								
Signature:		Date:						