



**Application for Membership – Volunteer Fire
Department**

1709 Avenue H ♦ PO Box 1010 ♦ Levelland, Texas 79336

Human Resources Phone 806-568-5428 ♦ Human Resources Fax 806-568-0103

Important: Read carefully and sign this application. Answer every question concisely but completely. Incomplete applications for membership in the Volunteer Fire Department will not be considered.

Volunteer Fire Firefighter _____
POSITION DESIRED DATE

NAME _____
(Last Name) (First Name) (Middle)

Mailing Address _____
Number Street or Avenue City State Zip

Telephone No: Home () _____ Cell () _____

Have you been interviewed by the City previously? Yes No

When _____ What Position? _____ By Whom? _____

Have you previously volunteered or worked for the City of Levelland in any position? Yes No

When will you be able to report for work? _____

Are you a U.S. Citizen? : Yes No

If not, provide alien registration number: _____

Have you ever been convicted of a felony: Yes No

Prior to employment, applicant will be investigated as to convictions for prior criminal offenses. A prior conviction will not automatically disqualify an applicant for employment and will be considered only as is related to the job applied for. Details (charges, penalties, where, when currently on parole, probated sentence) are requested.

Are you able to perform the essential functions of the job as a Volunteer Firefighter? Yes No

If no, which essential functions will you be able to perform? _____

What reasonable accommodations would help you to perform the essential functions? _____

High School or GED _____
School City/State Last Grade Completed

College/University: _____
Location Sem. Hours Major Minor Type of Degree

Special Skills and Qualifications - Summarize special skills and qualifications acquired from employment or other experience. Also, if applicable, indicate number of people you have supervised.

EMPLOYMENT RECORD - Start with your present or most recent job, include military service assignments and volunteer activities. Exclude organizations names which indicate race, color, religion, sex, national origin, or disability. Must include full and complete employment history for last 15 years as applicable. Explain breaks in employment, including unemployment benefits. Attach additional pages if necessary. This section must be completed despite the possible enclosure of a resume.

May we contact your present employer? Yes No

Employer _____ Telephone (____) _____
Job Title _____ Dates Employed: From _____ To _____
Salary: Starting \$ _____ Final \$ _____ Per <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Year
Supervisor _____
Worked Performed _____
Reason for Leaving _____
Employer _____ Telephone (____) _____
Job Title _____ Dates Employed: From _____ To _____
Salary: Starting \$ _____ Final \$ _____ Per <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Year
Supervisor _____
Worked Performed _____
Reason for Leaving _____
Employer _____ Telephone (____) _____
Job Title _____ Dates Employed: From _____ To _____
Salary: Starting \$ _____ Final \$ _____ Per <input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Year
Supervisor _____
Worked Performed _____
Reason for Leaving _____

REFERENCES:

List three persons who are not related by blood or by marriage to you and have definite knowledge of your qualifications and fitness for membership in the Volunteer Fire Department, which you are applying for:

	Name	Address	Phone No.
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

READ CAREFULLY BEFORE SIGNING

I hereby certify that the statements made, and answers given by me to the foregoing and following questions are true and correct and that there are no omissions of any kind whatsoever. I agree that any evasion, untruthful statement, answer, or omission shall be sufficient cause for discharge at any time. I agree to submit to the physical examination during the required drug screen, whenever requested by the City of Levelland, by doctor, or doctors designated by the City, either prior to or during the course of employment, subject to the requirements of ADA. I hereby release all doctors, medical personnel, and elected officials from all liability claims and damages in connection to furnishing any information to the City of Levelland. I hereby request and authorize the companies or persons show under "Employment Record" or other interested parties not necessarily named in the foregoing application to furnish the City of Levelland and information regarding my employment by them together with any information they may have regarding me, including motor vehicle records, military records, financial status, criminal records, and general reputation, and I hereby release such companies or person, the City of Levelland, its management and elected officials from all liability, claims and damages in connection with the furnishing of such information. I further acknowledge that my employment may be terminated, and any offer of employment if such is made, may be withdrawn with or without cause, at the option of the City or myself. I further acknowledge that the foregoing completed application form does not in any way constitute a contract of employment.

Signature of Applicant

Date

The City of Levelland, inclusive of the Volunteer Fire Department, is an equal opportunity employer and does not discriminate on the basis of race, creed, color, national origin, gender, religion, or disability.



**AFFIRMATIVE ACTION FORM
Volunteer Fire Fighter**

Government agencies require reports on status of applicants. This data is for analysis and affirmative action only. Submission is voluntary. Failure to supply this information will not jeopardize or adversely affect any consideration you may receive for employment or later advancement in employment.

Sex: Male Female

Race/ethnicity:

Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino) – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino) – A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino) – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino) – All persons who identify with more than one of the above five races.

Veteran: Non-veteran

Please identify where you learned about an employment opportunity with this organization.

- Newspaper ad Tech school/college placement Employee referral
 Temporary service Recruiter State employment service
 Other _____