



**Atwell Township Vol. Fire Department**

<p style="text-align: center;"><u>Station 40</u></p> <p>135 Concordia Church Rd China Grove, N.C. 28023 (704) 855-3240</p>	<p style="text-align: center;"><u>Station 50</u></p> <p>8480 Unity Church Rd Kannapolis, N.C. 28081 (704)934-2375</p>
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**Application of Employment**

**Atwell Fire Department** is an Equal Opportunity Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national ethnic origin, disability, age, veteran status, or sexual orientation.

**PLEASE PRINT.** Complete the entire application. You may attach a resume, but you still must complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box(don't just indicate "See Resume")

Position Applying For:		Date:	
Name(Last, First, Middle):			
Street Address:	City:	State:	Zip:
Social Security #:	Home Phone:	Work Phone:	Other Phone:
Blood Type:	Email Address:		
	Yes   No	Additional Comments	
Are you eligible to work in the U.S.?	___ ___		
Are you 18 years of age or older?	___ ___		
Are you currently employed?	___ ___	Full Time ___	Part Time ___
Do you have your N.C. FF Certification?	___ ___		
Do you have a current EMT certification?	___ ___		
Do you have a valid Drivers License?	___ ___	License # and expiration:	
Have you ever been convicted of a crime including traffic citations?	___ ___		
Are you currently taking any medications?	___ ___		

**EDUCATION**

Name of School	City/State	Graduate?	If No, # of years left	If Yes, Date of Graduation	Degree Received	Major
High School:						
GED:						
College:						
Other:						



**REFERENCES**

Please Provide 2 Personal References and 2 Professional References

<b>Reference Name</b>	<b>Daytime Phone #</b>	<b>Nighttime Phone #</b>	<b>Relationship</b>

**PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.**

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize **Atwell Fire Department** to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of **Atwell Fire Department** serve at-will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law. I understand that if employed I must agree to and comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_