



Application for Employment

SANTA CLARA COUNTY CENTRAL FIRE PROTECTION DISTRICT

14700 Winchester Boulevard • Los Gatos • CA 95032
(408) 378-4010 • www.sccfd.org



Instructions

Please read before signing. Answer all questions. This form may be filled out electronically or by hand in ink. Incomplete, unsigned or illegible applications may be disqualified. A certified digital signature is acceptable. Answers such as "see résumé" are not acceptable. However, if more room is needed to answer any questions, you may attach additional sheets. Only submit résumé when a specific job announcement instructs you to do so. Notify this agency of any contact information changes after submitting the application. Selected candidates may be subject to a department background investigation, medical examination and/or psychological evaluation.

Position you are applying for: _____

Indicate the type of employment that you will accept: Full Time ☐ Part Time ☐ Temporary/Seasonal ☐

Personal Information

Last Name _____ First Name _____ Middle _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email Address _____

Social Security # (last 4 digits) _____ Driver's License _____ State _____ Class _____

Can you provide verification of your legal right to work in the United States? Yes ☐ No ☐

Education

Name of last high school attended _____ Location _____

Did you graduate from high school? _____ If you did not graduate, do you have a GED? _____

Applicants who do not have a high school diploma must submit a statement from an accredited educational institution showing GED certificate.

| College or University (Name & Location) | Major | Degree(s) Received | Units Completed |
|---|-------|--------------------|-----------------|
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Indicate any other professional certifications or special training that you believe qualify you for this position:

List all positions you have held beginning with your most recent position. Attach additional sheets if needed .

| | |
|--|---|
| From _____ To _____ Salary _____ Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Hours per week _____ Supervisor Name and Phone _____ _____ May we contact your current employer? Yes <input type="checkbox"/> No <input type="checkbox"/> | Name and Address of Employer _____ _____ Job Title and Duties _____ _____ _____ _____ _____ Reason for Leaving _____ |
| From _____ To _____ Salary _____ Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Hours per week _____ Supervisor Name and Phone _____ _____ | Name and Address of Employer _____ _____ Job Title and Duties _____ _____ _____ _____ Reason for Leaving _____ |
| From _____ To _____ Salary _____ Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Hours per week _____ Supervisor Name and Phone _____ _____ | Name and Address of Employer _____ _____ Job Title and Duties _____ _____ _____ _____ Reason for Leaving _____ |
| From _____ To _____ Salary _____ Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Hours per week _____ Supervisor Name and Phone _____ _____ | Name and Address of Employer _____ _____ Job Title and Duties _____ _____ _____ _____ Reason for Leaving _____ |

Applicant Signature

I hereby certify that all statements made in this application are true. I agree and understand that any misstatement or omission of material facts will cause forfeiture of my eligibility for employment. I also understand that falsification or omission of information regarding any material facts will result in my disqualification of my application from eligible lists or dismissal from employment.

I have read and agree to the statement above.

Applicant's Signature

Date

Persons with disabilities who require accommodations may contact the Department's Personnel Office at (408) 378-4010.
The Santa Clara County Central Fire Protection District is an Equal Opportunity Employer.

Voluntary Self-Identification

Your voluntary answers to this section will provide statistics needed to evaluate our recruitment program as well as prepare statistical reports required by federal, state and county agencies. This section will be detached. No employment decisions will be made based on the information provided.

Sex

- ☐ Male
- ☐ Female

Ethnic Group

- ☐ Two or More Races - all persons who identify with more than one of the below categories (please indicate which groups).
- ☐ American Indian or Alaskan Native
- ☐ Asian origins in the Far East, Southeast Asia, or the Indian Subcontinent
- ☐ Black or African American
- ☐ Filipino
- ☐ Hispanic or Latino
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White origins in any of original peoples of Europe, Middle East or North Africa

Recruitment History

How did you learn about this position? Please check the applicable box and provide details as appropriate.

- ☐ Friend or relative
- ☐ County Fire Department employee
- ☐ An organization or group (please indicate which one) _____
- ☐ Newspaper/On-line advertisement (please indicate which one) _____
- ☐ Job posting or announcement (please indicate where) _____
- ☐ Other _____