



Warrenville Fire Protection District
3S472 Batavia Road
Warrenville, IL 60555

Application Date \_\_\_\_\_

Warrenville Fire Protection District Membership Application

Paid on Call (POC) Firefighter [ ]

Part Time Firefighter [ ]

Social Security # \_\_\_\_\_ Name \_\_\_\_\_

Other names you have used (including maiden name) \_\_\_\_\_

Birth Date \_\_\_\_\_

Current Address

Street Address City State Zip Code

Mailing Address

Street Address City State Zip Code

Contact Numbers

Cell Home e-mail

business fax

Have you ever applied to, or worked for, Warrenville Fire Protection District before? [ ]Yes [ ]No

If yes, What date were you hired? \_\_\_\_\_ What date did you leave? \_\_\_\_\_

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? [ ]Yes [ ]No

Do you have any friends and/or relatives working for Warrenville Fire Protection District? [ ]Yes [ ]No

Name Relationship

Name Relationship

Are you able to perform the essential functions of the job for which you are applying, either with or without, reasonable accommodation? [ ]Yes [ ]No

If no, please describe the functions that cannot be performed \_\_\_\_\_

Current Employer \_\_\_\_\_

Street Address City State Zip Code

Supervisor's Name Tel # \_\_\_\_\_

Position or Title Nature of work \_\_\_\_\_

If hired by the District, applicants will be required to disclose certain identifying information to the District, including hair color, eye color, weight, height, and a description and location of any identifying marks (such as tattoos and scars).

# Warrenville Fire Protection District Membership Application - Continued

Do you have a valid Illinois driver's license?     Yes     No                      Number and Class \_\_\_\_\_

Have you been convicted of a felony?             Yes     No

Have you had any previous fire experience?     Yes     No

Describe \_\_\_\_\_

## EDUCATIONAL HISTORY

Name of School	Location of School	Number of Years Attended	Course of Study	Graduate
				<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

## MILITARY HISTORY

Are you now or have you ever been in the military service of the United States?  Yes     No

If yes:      Branch of Service \_\_\_\_\_                                      Serial # \_\_\_\_\_

Highest Rank held \_\_\_\_\_                                              Type of discharge \_\_\_\_\_

Period of active duty,    From \_\_\_\_\_                      To \_\_\_\_\_

Are you now or were you ever an active member of any branch of the US Military Reserve Forces or National Guard Unit?  Yes     No

If yes,      Rank \_\_\_\_\_                      Unit \_\_\_\_\_      From \_\_\_\_\_                      To \_\_\_\_\_

## CERTIFICATES EARNED

EMT-B     Yes     No                                              FIREFIGHTER II       Yes     No

EMT-P     Yes     No                                              FIREFIGHTER III       Yes     No

FAE       Yes     No                                              CERTIFIED DIVER       Yes     No

OTHER     Yes     No      \_\_\_\_\_

**If the answer to any of the above is "Yes," please provide a copy of any certificates you have earned with your completed application.**

## CONVICTION HISTORY

27. Have you ever been convicted of a crime other than minor traffic violations? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, explain below:

Date	Policy Agency	Offense	Disposition of Case

28. List all traffic convictions and accidents you have had in the last four (4) years.

(If more room is needed, please type on a separate page and attach.)

Location (City, State)	Approximate Date	Violation	Disposition

I hereby make application for membership to the Warrenville Fire Protection District.

I agree to obey the by-laws and all the rules of the Warrenville Fire Protection District if I am accepted.

Upon leaving the District, I agree to turn in all equipment belonging to the District which has been entrusted to me during the time of my membership. I declare, to the best of my knowledge, that all the information provided by me on this application is true, correct, and complete.

**SIGNATURE OF APPLICANT** \_\_\_\_\_

**LIST ALL FORMER ADDRESSES FOR THE PAST TEN YEARS IN CHRONOLOGICAL ORDER**

29. Address \_\_\_\_\_  
       Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

30. Address \_\_\_\_\_  
       Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

31. Address \_\_\_\_\_  
       Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

32. Address \_\_\_\_\_  
       Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

33. Address \_\_\_\_\_  
       Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**EMPLOYMENT HISTORY**

List all jobs you have had for the last ten years. Include periods of unemployment. Put your present job first. Include military service in proper time sequence along with temporary or part-time jobs.

34. **Employer's name:** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
       Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Job Description** \_\_\_\_\_

Do you object to our contacting them? \_\_\_\_\_

**Employed** \_\_\_\_\_ to Present  
                   month-year

35. **Employer's name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
       Number & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Job Description** \_\_\_\_\_

Do you object to our contacting them? \_\_\_\_\_

**Employed** \_\_\_\_\_ to \_\_\_\_\_  
                   month-year                     month-year

36. **Employer's name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
Number & Street City State Zip

**Job Description** \_\_\_\_\_

Do you object to our contacting them? \_\_\_\_\_

**Employed** \_\_\_\_\_ to \_\_\_\_\_  
month-year month-year

37. **Employer's name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
Number & Street City State Zip

**Job Description** \_\_\_\_\_

Do you object to our contacting them? \_\_\_\_\_

**Employed** \_\_\_\_\_ to \_\_\_\_\_  
month-year month-year

38. **Employer's name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
Number & Street City State Zip

**Job Description** \_\_\_\_\_

Do you object to our contacting them? \_\_\_\_\_

**Employed** \_\_\_\_\_ to \_\_\_\_\_  
month-year month-year

39. **Employer's name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
Number & Street City State Zip

**Job Description** \_\_\_\_\_

Do you object to our contacting them? \_\_\_\_\_

**Employed** \_\_\_\_\_ to \_\_\_\_\_  
month-year month-year

40. **Employer's name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
Number & Street City State Zip

**Job Description** \_\_\_\_\_

Do you object to our contacting them? \_\_\_\_\_

**Employed** \_\_\_\_\_ to \_\_\_\_\_

41. **Employer's name** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Address** \_\_\_\_\_  
Number & Street City State Zip

**Job Description** \_\_\_\_\_

Do you object to our contacting them? \_\_\_\_\_

**Employed** \_\_\_\_\_ to \_\_\_\_\_  
month-year month-year

42. Have you ever been suspended or terminated, other than from an economic layoff, from any prior employment? Yes \_\_\_\_ No \_\_\_\_ If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

43. Have you ever resigned from any employment position because of misconduct or unsatisfactory performance or while under investigation? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

44. Have you ever taken a civil service exam? Yes \_\_\_\_\_ No \_\_\_\_\_

Agency \_\_\_\_\_ Date \_\_\_\_\_ Position on List \_\_\_\_\_

Status \_\_\_\_\_

45. Are you currently on any eligibility list(s)? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, indicate position applied for, status on list and expiration date of each: \_\_\_\_\_

---

---

---

### **REFERENCES**

Please list three (3) adults not related to you and not former employers, who have known you for more than three (3) years. All persons to whom you refer will be asked to appraise your character, ability, experience, personality, and other qualities.

46. Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Relationship \_\_\_\_\_

47. Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Relationship \_\_\_\_\_

48. Name \_\_\_\_\_ Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Relationship \_\_\_\_\_

49. List organizations of which you are a member that relate to the position for which you are applying:

---

---

---

---

---

50. Explain your reasons for wanting to become a firefighter/EMT-B and/or firefighter/paramedic: \_\_\_\_

---

---

---

---

---

51. Person(s) to be notified in case of emergency.

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**I HEREBY CERTIFY THAT I HAVE READ THE ABOVE QUESTIONS AND STATEMENTS, AND I CERTIFY THAT THERE ARE NO MISREPRESENTATIONS, OMISSIONS, OR FALSIFICATIONS IN THIS QUESTIONNAIRE, AND THAT ALL MY ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MISREPRESENTATIONS, OMISSIONS OR FALSIFICATIONS ON THIS QUESTIONNAIRE OR AT ANY TIME DURING THE HIRING PROCESS MAY RESULT IN MY APPLICATION NO LONGER BEING CONSIDERED OR IN TERMINATION OF MY EMPLOYMENT WITH WARRENVILLE FIRE PROTECTION DISTRICT.**

Dated at \_\_\_\_\_ Illinois, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Signature in Full \_\_\_\_\_

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER.** This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age, or physical or mental handicap. All information provided in this application will be treated confidentially, and will be used only to help assure the best use of your abilities if you are employed with us.



**Warrenville Fire Protection District  
AUTHORIZATION FORM**

---

I, \_\_\_\_\_, hereby authorize the Warrenville Fire Protection District and its agents, employees or representatives to obtain and use all information relating to my previous and current employment, education, military record, criminal conviction history, personal characteristics, credit history, and all other information which may bear favorably or unfavorably upon my application for employment made to the Warrenville Fire Protection District. I also consent to the release to the Warrenville Fire Protection District of any and all medical records prepared during the physical examination I am required to undergo for employment with the Warrenville Fire Protection District. I further release from liability any person or persons providing or receiving any such information in connection with this pre-employment investigation.

I understand that I will undergo a job task test as part of the application process and that such job task test shall subject me to vigorous physical exercise. I further understand that I should be in appropriate physical condition before performing the test and that I must submit the WARRENVILLE FIRE PROTECTION DISTRICT CERTIFICATION OF SAFE PARTICIPATION IN JOB TASK TEST form prior to participating in the job task test.

I also agree to indemnify and hold harmless the Warrenville Fire Protection District, the Board of Fire Commissioners of the Warrenville Fire Protection District, the individual trustees and commissioners, employees and agents against any claim or loss whatsoever, including but not limited to attorneys' fees and any cost of defense which arises directly or indirectly out of any injury which I might sustain in the job task test and/or application process. I also covenant that for the consideration of my application, I agree not to sue the Warrenville Fire Protection District, the individual trustees and commissioners, employees and agents for any injury, loss or damage as a result of such process including but not limited to personal injury, wrongful death, court costs, attorneys' fees and interest, in any manner caused directly or indirectly, including the negligent acts or omissions of the Warrenville Fire Protection District, its trustees and commissioners as well as its employees and agents.

I hereby acknowledge and agree that as a condition of employment with the Warrenville Fire Protection District, I must maintain at all times a valid State of Illinois Driver's License of the Class required to operate all vehicles of the Warrenville Fire Protection District. I do further agree that my failure to maintain said driver's license will constitute reason for withdrawal of a conditional offer of hire or just cause for my dismissal from employment with the District. At time of hire, I must qualify for, obtain and maintain at all times a valid State of Illinois Firefighter II certification by Illinois State Fire Marshal and EMT – P/B by Illinois Department of Public Health. I do further agree that my failure to obtain and maintain the requisite certifications will constitute reason for withdrawal of a conditional offer of hire or just cause for my dismissal from employment with the Warrenville Fire Protection District.

Signature \_\_\_\_\_

SUBSCRIBED and SWORN to  
before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER.** This organization is committed to the policy of equal employment opportunity in recruitment, hiring, career advancement, and all other personnel practices. Your job related experience and other qualifications will be considered without discrimination on the grounds of race, color, religion, sex, national origin, age, or physical or mental handicap. All information provided in this application will be treated confidentially, and will be used only to help assure the best use of your abilities if you are employed with us.