

EDUCATION RECORD - IF NOW IN SCHOOL, INCLUDE PRESENT TERM.

NAME AND LOCATION OF HIGH SCHOOL: _____

GRADUATED? _____ YES _____ NO DATE GRADUATED: _____

IF NOT A HIGH SCHOOL GRADUATE,
DO YOU HAVE A CERTIFICATE OF EQUIVALENCY (GED)? _____ YES _____ NO

PLEASE LIST SCHOOLS ATTENDED AFTER HIGH SCHOOL, OR SPECIAL TRAINING RECEIVED.

NAME AND LOCATION	From		To		Full Time	Part Time	Major	Credits	Certificate or Degree Earned
	Mo	Yr	Mo	Yr					

LIST ANY OTHER TRAINING, LICENSES, CERTIFICATES, OR SKILLS YOU HAVE THAT ARE PERTINENT TO THE POSITION:

THIS SECTION MUST BE COMPLETED. A RESUME WILL NOT BE ACCEPTED AS A SUBSTITUTE

EMPLOYMENT HISTORY - BEGINNING WITH YOUR MOST RECENT JOB, DESCRIBE YOUR WORK EXPERIENCE DURING THE PAST TEN YEARS. INCLUDE ALL NON-PAID OR VOLUNTEER WORK. ATTACH ADDITIONAL SHEETS AS NEEDED.

EMPLOYER NAME:		ADDRESS:	
YOUR JOB TITLE:		SUPERVISORS NAME AND PHONE:	
		FROM	TO
SPECIFIC DUTIES:		START SALARY	
REASON FOR LEAVING:		LAST SALARY	

IF YOU STILL WORK HERE, MAY WE CONTACT YOUR EMPLOYER? _____ YES _____ NO

EMPLOYER NAME:		ADDRESS:	
YOUR JOB TITLE:		SUPERVISORS NAME AND PHONE:	FROM TO
SPECIFIC DUTIES:		START SALARY	
REASON FOR LEAVING:		LAST SALARY	

EMPLOYER NAME:		ADDRESS:	
YOUR JOB TITLE:		SUPERVISORS NAME AND PHONE:	FROM TO
SPECIFIC DUTIES:		START SALARY	
REASON FOR LEAVING:		LAST SALARY	

EMPLOYER NAME:		ADDRESS:	
YOUR JOB TITLE:		SUPERVISORS NAME AND PHONE:	FROM TO
SPECIFIC DUTIES:		START SALARY	
REASON FOR LEAVING:		LAST SALARY	

EMPLOYER NAME:		ADDRESS:	
YOUR JOB TITLE:		SUPERVISORS NAME AND PHONE:	FROM TO
SPECIFIC DUTIES:		START SALARY	
REASON FOR LEAVING:		LAST SALARY	

REFERENCES - LIST THE NAMES OF THREE PERSONS OTHER THAN RELATIVES OR FORMER EMPLOYERS

NAME	ADDRESS	TELEPHONE
1.	_____	_____
2.	_____	_____
3.	_____	_____

CERTIFICATE OF APPLICANT - READ CAREFULLY BEFORE SIGNING

- I HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE, AND I AGREE AND UNDERSTAND THAT ANY MISSTATEMENT OF MATERIAL FACTS HEREIN WILL CAUSE FORFEITURE ON MY PART OF ALL RIGHTS TO ANY EMPLOYMENT IN THE SERVICE OF THE ROGUE RIVER RURAL FIRE DISTRICT.
- I AUTHORIZE ANY OF THE FORMER EMPLOYERS NAMED IN MY APPLICATION TO RELEASE ANY INFORMATION IN THE POSSESSION OF SUCH EMPLOYER REGARDING MY WORK PERFORMANCE.
- I UNDERSTAND THAT THE APPLICATION WILL ONLY BE CONSIDERED FOR THE POSITION APPLIED FOR.
- I HEREBY GIVE MY PERMISSION TO THE ROGUE RIVER RURAL FIRE PROTECTION DISTRICT TO CONDUCT ANY INVESTIGATION NECESSARY OF MY PAST ACTIVITIES.

SIGNATURE: _____

DATE: _____

PLEASE INCLUDE PHOTO COPIES OF THE FOLLOWING:

Any Certificates