

Contact Person

Job Title

Telephone NO.

Have you been convicted of a crime
or moving Traffic violation within the last 7 years ?

_____ Yes _____ No

Conviction will not necessarily disqualify an applicant

If Yes, Please explain _____

SPECIAL SKILL AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience.

EDUCATION

Describe any specialized training, apprenticeship, skills and extra-curricular activities you have.

Describe any related honors you have received.

State any additional information you feel may be helpful to us in considering your application.

List professional, trade, business or civic activities and offices held.

You may exclude memberships which would reveal sex, race, religion, national origin, ancestry, or handicap or other protected status:

Generally, what hours are you available to respond to emergencies and attend training ?

REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

May we contact them? If Yes, _____
Signature

Have you ever had any job-related training in the United States military? Yes No

If yes, please describe _____

Are you physically or otherwise able to perform the duties of the job for which you are applying? Yes No

ADDITIONAL INFORMATION (optional – Applicant is encouraged to add any other information they wish to give that has not been requested)

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for membership.

This application for membership shall be considered active for a period of time not to exceed one year. Any applicant wishing to be considered for membership beyond this time period should inquire as to whether or not applications are being accepted at that time.

I understand and acknowledge that, unless otherwise defined by applicable law, a membership relationship with this organization is of an "at will" nature which means that the member may resign at any time and the Commission may discharge the member at any time with or without cause. It is further understood that this "at will" membership relationship may not be changed unless such change is specifically acknowledged in writing by the Board of Fire Commissioners,

I understand that false or misleading information given in my application or interview(s) may result in discharge.

I understand, also, that I am required to abide by all rules, policies and procedures of the department.

Signature of Applicant

Date

Applicant under age of eighteen:

Signature of Parent / Legal Guardian

Date

Application to be returned to:

**Suffield Fire Department
Office of the Chief
73 Mountain Road
Suffield, Connecticut 06078-2041**