



Application for Employment

Lyons Rural Fire Protection District, 1114 Main St/PO BOX 179 Lyons OR 97358

Applicants for all positions are considered without regard to race, color, religion, sex, sexual orientation, gender ID, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or disability, or any other legally protected status.

PLEASE PRINT ALL INFORMATION

Position Applied For

Date of Application

Last Name

First Name

Middle Name

Address

City

State

Zip Code

Home Phone Number

Cell Phone Number

Email Address

Available to work (*check all that apply*): Weekdays Nights Weekends Holidays

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
 Yes No (*Proof of citizenship or immigration status will be required upon employment.*)

Valid Oregon Driver's License? Yes No

Do you have three years of verifiable driving experience? Yes No

State of Issue _____ License Number _____ Type or Class _____

REQUIRED TO APPLY - Please attach copies of **all required certifications** to this application. Refer to the appropriate job description for a list of required certifications. Failure to submit proper documentation may disqualify you from the employment process.

Optional:

Please attach any additional certifications that may be relevant (Personal Resume, References, Etc.).



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EMPLOYMENT EXPERIENCE

Starting with your present employment, document your last 10 years of employment. Include any job related military service assignments. Volunteer activities may be included if you desire, but you are not required to disclose any protected status information.

Employer		Dates Employed	
Job Title		From	To
Supervisor		Hourly Rate/ Salary	
Employer Phone		Starting	Final
Work Performed		Reason for Leaving	

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If you need additional space, please continue on a separate sheet of paper.



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EDUCATION

Have you received a high school diploma or GED? Yes No

High School Name: _____ Location: _____

College Education

1. School Name: _____ Location: _____

Degree Program: _____ Diploma Received? Yes No

2. School Name: _____ Location: _____

Degree Program: _____ Diploma Received? Yes No

List professional, trade business, or civic activities, special skills, honors and/or additional qualifications:

Professional References (Other than relatives and/or employers already listed)

Name	
Relation To You	
Phone	
Address	

Name	
Relation To You	
Phone	
Address	

Name	
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Veteran of the U.S. Military service? Yes No Branch _____

(Under Oregon law, armed forces veterans who meet minimum qualifications for a position may be eligible for employment preference. You may be eligible for either 5 points as a Qualified Veteran, or 10 points as a Qualified Disabled Veteran (or spouse), but not both. If you are a veteran and want to apply for preference points, please submit a completed Veterans' Preference form as well as the required documentation listed on the form. **All documentation for Veteran's Preference must be received prior to the date of the written test.**)

APPLICANT'S STATEMENT (PLEASE READ CAREFULLY)

In exchange for the consideration for my job application by Lyons Rural Fire Protection District, I agree that:

The facts set forth on this application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause for immediate dismissal.

I _____ (print your name) authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for rejection for my application or dismissal from employment at any time without any previous notice. I hereby give Lyons Rural Fire Protection District permission to review public records regarding my personal and professional background, and to contact schools, previous employers, references, and others, and hereby release Lyons Rural Fire Protection District from any liability as a result of such contacts.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. If employed, I understand that Lyons Rural Fire Protection District may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction on benefits. I further understand that, if selected as a finalist, I will be required to take and pass a drug and alcohol test, as well as a background investigation prior to appointment to this position. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant _____ Date _____



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**PRE-EMPLOYMENT AGREEMENT
AUTHORIZATION TO RELEASE INFORMATION**

Please read carefully before signing

Statement

By signing, I acknowledge that my employment with the Lyons Rural Fire Protection District and Ambulance Service is contingent upon investigation of my background, which includes but is not limited to character, criminal, and driving history. I authorize my information to be used for these listed purposes.

Driver's License Number _____ State _____

Social Security Number _____ Date of Birth _____

Print Name

Applicant Signature

Date