



# Membership Application

East Dubuque Fire Department

183 Sinsinawa Avenue

East Dubuque, Illinois 61025-1218

(815) 747-6619

FOR OFFICE USE ONLY

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We welcome you to the East Dubuque Fire Department. Filling out this application is the first step in turning your talents and skills into positive action for your community.

It is the policy and intent of the East Dubuque Fire Department to provide equal opportunity in employment to all persons. This policy prohibits discrimination because of race, color, religion, national origin, political affiliation, marital status, veteran status, physical or mental disability, sex or age or any other legally protected status (except when sex, age, or physical or mental disability is a bona fide occupational qualification) in all aspects of our personnel policies, programs, practices and operations. Applicants are required to live in the East Dubuque Fire Protection Area or a reasonable distance from the fire protection area for a minimum of six (6) months and not in another volunteer fire district.

All information contained in or connected with this application will be considered personal and confidential and used only in conjunction with your possible employment by the City of East Dubuque and East Dubuque Fire Department. Please furnish us with complete information as outlined in this application. You are encouraged to attach any additional information which you believe qualifies you for the position for which you are applying.

**PLEASE USE TYPEWRITER OR PRINT IN INK**

APPLIED FOR PAID PER CALL: FIRE <input type="checkbox"/> EMS <input type="checkbox"/> (Please select the boxes for each area you are interested. You are able to select both boxes)	DATE OF APPLICATION  /        /
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## PERSONAL INFORMATION

LAST NAME		FIRST NAME		M.I.
ADDRESS	APT.	CITY	STATE	ZIP CODE
HOME PHONE NO. (    )		CELL PHONE NO. (    )		
DATE OF BIRTH		SOCIAL SECURITY NO.		
EMAIL ADDRESS		HOW LONG HAVE YOU LIVED IN FIRE PROTECTION AREA		
DRIVER'S LICENSE NUMBER			DRIVER'S LICENSE STATE	
HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED OR REVOKED? IF YES, EXPLAIN			YES	NO
HAS YOUR DRIVER'S LICENSE EVER BEEN PLACED ON PROBATION? IF YES, EXPLAIN			YES	NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME? (Exclude juvenile court cases and minor traffic violations for which you were fined \$130 or less and any arrests or convictions that are sealed or expunged.)

IF "YES", EXPLAIN THE NATURE OF THE OFFENSE, DATE AND LOCATION. YES NO

**NOTE:** A "YES" ANSWER IS NOT AN AUTOMATIC DISQUALIFICATION, BUT AN UNTRUE ANSWER WILL DISQUALIFY YOU.

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CAN YOU PERFORM ALL THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING WITH OR WITHOUT REASONABLE ACCOMODATION?

YES NO

**INSTRUCTIONS:** List all employers, beginning with your present or most recent employment. It is important to be complete. List all work experience including military, volunteer and intern experience. Feel free to duplicate this page to list additional employers and to attach a resume to the application after completing this page.

## EMPLOYMENT

NAME OF PRESENT OR LAST EMPLOYER	MAILING ADDRESS, CITY, STATE	ZIP CODE	TELEPHONE
POSITION HELD	EMPLOYMENT DATES FROM ____ / ____ / ____ TO ____ / ____ / ____		
DUTIES PERFORMED			
NAME OF NEXT PREVIOUS EMPLOYER	MAILING ADDRESS, CITY, STATE	ZIP CODE	TELEPHONE
POSITION HELD	EMPLOYMENT DATES FROM ____ / ____ / ____ TO ____ / ____ / ____		
DUTIES PERFORMED			
NAME OF NEXT PREVIOUS EMPLOYER	MAILING ADDRESS, CITY, STATE	ZIP CODE	TELEPHONE
POSITION HELD	EMPLOYMENT DATES FROM ____ / ____ / ____ TO ____ / ____ / ____		
DUTIES PERFORMED			
NAME OF NEXT PREVIOUS EMPLOYER	MAILING ADDRESS, CITY, STATE	ZIP CODE	TELEPHONE
POSITION HELD	EMPLOYMENT DATES FROM ____ / ____ / ____ TO ____ / ____ / ____		

DUTIES PERFORMED

**EDUCATION AND TRAINING RECORD**

CIRCLE THE HIGHEST GRADE COMPLETED		GRADE SCHOOL/HIGH SCHOOL												COLLEGE				POST-GRADUATE			
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	1	2	MA	PhD
NAME AND ADDRESS OF LAST SCHOOL ATTENDED				DID YOU GRADUATE?				GED TEST?													
				YES NO				YES NO													
NAME AND LOCATION OF SCHOOL		TOTAL NO. OF CREDIT HOURS		TYPE OF TRAINING OR MAJOR		FROM	TO	NAME OF CERTIFICATE OR DEGREE RECEIVED													
		SEM QTR																			

LIST ANY LICENSES (TYPE AND NO.), SEMINARS, TRAINING SESSIONS, SKILLS, WORK EXPERIENCE, ETC. THAT MAY CONTRIBUTE TO YOUR VOLUNTEER EFFORTS (FOR EXAMPLE: FOREIGN LANGUAGE, EMERGENCY SERVICE TRAINING, PAST VOLUNTEER EXPERIENCE, ETC).

### PROFESSIONAL REFERENCES

LIST THREE REFERENCES FROM PAST OR CURRENT EMPLOYERS. THESE PEOPLE SHOULD BE FAMILIAR WITH YOUR WORK AND BE IN A SUPERVISORY OR MANAGEMENT POSITION. ONE REFERENCE SHOULD BE FROM CURRENT EMPLOYER. ONE REFERENCE MAY BE A CURRENT EAST DUBUQUE FIRE DEPARTMENT MEMBER.

1.	NAME	ADDRESS	PHONE NO.	RELATIONSHIP
2.	NAME	ADDRESS	PHONE NO.	RELATIONSHIP
3.	NAME	ADDRESS	PHONE NO.	RELATIONSHIP

### MISCELLANEOUS

ARE YOU PROFICIENT IN ANY OTHER LANGUAGES? (Please indicate degree of proficiency in speaking, reading and writing.)

1.	NAME OF LANGUAGE:	PROFICIENCY
2.	NAME OF LANGUAGE:	PROFICIENCY

WERE YOU EVER EXPELLED OR SUSPENDED FROM ANY SCHOOL?  
 IF YES, EXPLAIN YES NO

### MILITARY SERVICE

HAVE YOU EVER SERVED IN ANY MILITARY ORGANIZATION OF THE U.S.  YES      NO	IF YES, GIVE DETAILS
GIVE DATE & LOCATION OF DISCHARGE (City & State)	
WHAT TYPE OF DISCHARGE DID YOU RECEIVE? (Honorable, Medical, Dishonorable, Honorable Conditions, etc.)	
WERE YOU EVER CONVICTED AT A COURT MARTIAL?  YES      NO	IF YES, GIVE DETAILS
ARE YOU NOW OR WERE YOU EVER A MEMBER OF ANY BRANCH OF THE U.S. RESERVE FORCES?  YES      NO	IF YES, GIVE DETAILS

ARE YOU NOW OR WERE YOU EVER A MEMBER OF THE NATIONAL GUARD?

YES

NO

IF YES, GIVE DETAILS

