



Bethel Township Fire Department
 8735 South Second Street
 Tipp City, Ohio 45371
 Miami County
 Phone: 937-845-4274
 Fax: 937-845-7316
 www.betheltownship.org



APPLICATION FOR EMPLOYMENT

The Bethel Township Fire Department, Miami County, is an equal opportunity employer. Qualified applicants are considered without regard to race, color, religion, sex, national origin, age, marital or veteran status or the presence of a non-job related medical condition or handicap.

Date Applied: ____/____/____ Position: _____

PERSONAL INFORMATION

Last Name: _____ First Name: _____ MI: _____

Present Address: _____
 (NO P.O. BOX) Street

 City State Zip

Home Phone: (____)____-____ Cell Phone: (____)____-____

E-Mail address: _____

Date of Birth: _____

Previous Address: _____
 (NO P.O. BOX) Street

 City State Zip

EDUCATIONAL HISTORY

High School: _____
Name

Start Date: ____/____/____ Address Ending Date: ____/____/____

Diploma Received: _____

Trade School: _____
Name

Start Date: ____/____/____ Address Ending Date: ____/____/____

Course of Study: _____ Certificate/Diploma Received: _____

College: _____
Name

Start Date: ____/____/____ Address Ending Date: ____/____/____

Course of Study: _____ Certificate/Degree Received: _____

List Any Additional Training Below:

EMPLOYMENT HISTORY

List your past three employers starting with the most recent.

Employer: _____

Address: _____
Street
City State Zip

From: ____/____/____ To: ____/____/____ Job: _____

Phone: (____)____-____ EXT: _____ May we contact this employer: _____

Supervisor: _____ Reason for leaving: _____

Employer: _____

Address: _____
Street
City State Zip

From: ____/____/____ To: ____/____/____ Job: _____

Phone: (____)____-____ EXT: _____ May we contact this employer: _____

Supervisor: _____ Reason for leaving: _____

Employer: _____

Address: _____
Street
City State Zip

From: ____/____/____ To: ____/____/____ Job: _____

Phone: (____)____-____ EXT: _____ May we contact this employer: _____

Supervisor: _____ Reason for leaving: _____

PERSONAL REFERENCES

Please list three non-relatives whom you have known for at least two years.

Name: _____ Phone: (_____)_____-_____

Address: _____
Street

City State Zip

Relationship: _____ Years Known: _____

Name: _____ Phone: (_____)_____-_____

Address: _____
Street

City State Zip

Relationship: _____ Years Known: _____

Name: _____ Phone: (_____)_____-_____

Address: _____
Street

City State Zip

Relationship: _____ Years Known: _____

Have you ever been convicted of a misdemeanor other than a traffic violation ?, if yes, explain.

Have you ever been charged with a felony ?, if yes, explain and give details of final outcome.

Do you have any previous emergency service experience ?, if yes, when and with whom ?.

DRIVING RECORD

=====

Do you have a valid driver's license? _____ Yes _____ No
Driver's License Number: _____ Expiration Date: _____
State Issued: _____

List any restriction on driver's license _____

Have you been cited for any traffic violations during the past 3 years (failure to stop, OVI, speed, etc.)? ___No ___Yes

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for, is cause for dismissal. I further understand and agree that my membership/employment is for no defined period and may be terminated at any time with prior notice and cause.

Signature: _____

Date: _____/_____/_____

Bethel Township Fire Department
8735 South Second Street
Tipp City, Ohio 45371
Miami County
(937) 845-4274
Fax (937) 845-0091

I, _____, date of Birth ____/____/____, age _____,
SSN _____ - _____ - _____, presently residing at _____,
Street Address

_____ have applied for employment with the **Bethel**
City State Zip
Township Fire Department, Miami County, Ohio. I have been advised and am fully aware
that this prospective employer will be conducting a thorough investigation of my background to
assist in determining my suitability for this employment.

I authorize release to the **Bethel Township Fire Department, Miami County, Ohio** of any
confidential records and information they want in connection with my application for
employment.

I hereby waive all provisions of law forbidding the **Miami County Sheriff** from disclosing any
knowledge or information they have concerning me, which is requested or desired by the **Bethel**
Township Fire Department, Miami County, Ohio. I hereby give consent and request that the
Miami County Sheriff disclose any such knowledge or information they may have regarding
me, which they desire.

I further consent and request the **Bethel Township Fire Department, Miami County, Ohio** or
their representative be provided with a copy of any such records or reports concerning me, which
they desire.

Signature: _____

Date: ____/____/____