Fire District 3

8383 Agate Road, White City, OR 97503 541-826-7100 www.jcfd3.com



Student/Volunteer Application

Fire District 3 is an equal opportunity employer. All applicants will be considered without regard to age, race, color, religion, gender, sexual orientation, marital status, national origin, mental or physical disability, or other protected status in accordance with applicable federal and state equal opportunity laws unless based on a bona-fide occupational qualification.

Position Applying for: Full Name: Last First Address: Street Address		M.I.	
Last First Address:			
Address:			
		Apartment/Unit #	
City State		ZIP Code	
Contact Number:			
Email:			
Driver's License Number:	State Issu	ned:	
Are you at least 18 years of age?	Yes	No	
Are you a citizen of the United States?	Yes	No	
If no, are you authorized to work in the United States?	Yes	No	
Previous Employment Are you a current member of Fire District 3? Yes	No		
If yes, please specify title:			
Have you been employed or volunteered with Fire District 3?	Yes	No	
If yes, please specify title and dates of employment:			
Titi	e	Dates	
Provide names of Fire District 3 members you are related to or	r with whom y	ou live:	

Education/Training High School Name/Location				
	Name		Location	
Graduated? Yes f not a high school graduate	No e, do you have a certifi	cate of equivalency	y (GED)? Yes	No
Date of GED:		_		
ist all education beyond hi	gh school:			
Name and location	Course of study	Dates attended	Credits completed	Degree earned
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Employment History

List all work experience, including military and volunteer, beginning with your current or most recent position. Briefly describe each position separately, emphasizing your specific tasks and supervisory, technical, or other responsibilities. Give special attention to experience relating to the position for which you are applying for. Account for any periods of unemployment or self-employment. If the space provided is not adequate, please attach additional sheets.

Employer				Address
Your Title				Supervisor's Name/Phone
Begin Date	End Date	Full Time	Part Time	Reason for Leaving:

Employer				Address
Your Title				Supervisor's Name/Phone
Begin Date	End Date	Full Time	Part Time	Reason for Leaving:

Employer				Address
Your Title				Supervisor's Name/Phone
Begin Date	End Date	Full Time	Part Time	Reason for Leaving:

Employer				Address
Your Title				Supervisor's Name/Phone
Begin Date	End Date	Full Time	Part Time	Reason for Leaving:
Employer				Address
Your Title				Supervisor's Name/Phone
Begin Date	End Date	Full	Part	Reason for Leaving:
		Time	Time	
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				nd professional reference check, and physiological
complete to th		nowledge ar	nd that I und	I provided as part of this application process is true and derstand that any misstatement of fact <i>may</i> result in my
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Signature				
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Mail, deliver, or email completed application, supplemental questionnaire, and all required documents to:

Fire District 3 8383 Agate Road White City, OR 97503