

Novato Fire Protection District 95 Rowland Way, Novato, CA 94945 415-878-2690

NFD Use Only Date/Time Rec'd:

www.novatofire.org

EMPLOYMENT APPLICATION

Please type or print in ink, and ensure you are submitting a completed application. Incomplete or illegible applications will not be considered.

Position Desired:	Email <i>A</i>	Address:		
Name:				
Name:	FIRST		MIDDLE	
Mailing Address:	D POV CITY	STATE	ZIP	
Phone: Home ()	Work: ()	Cell: ()		
	EDUCATIONAL INFO	DRAATION		
	EDUCATIONAL INFO	RMATION		
Do you have a high school diplo	oma or GED Certificate? Yes	No Highest 0	Grade Completed:	
Name High School:				
Address of High School:				
Have you attended a college, u	niversity, or vocational school?	Yes No		
Name of College/University/Vocational School:				
warne of conege, oniversity, vo	cational School.			
Address of College/University/\	/ocational School:			
Did you obtain a degree or cert	ificate? Yes No	If no, number of	units completed:	
If yes, please list degree or cert	ificate and major/area of study	/:		
Do you have any other college,	university, or vocational school	ol credits/units? Yes	No	
If yes, name of college/universi	ty/vocational school: _			
Units Completed:				

EDUCATIONAL INFORMATION (Continued)

Please list any technical or profe	ssional licenses related to this position:
Please list any additional speciali	zed training for this position:
EMPLOYM	IENT HISTORY (BEGINNING WITH MOST RECENT)
1. From:	Job Title:
To:	_ Supervisor's Name*:
Phone: ()	Employer:
Address:	
Describe Job Duties:	
Reason for Leaving:	
*Your current supervisor will not	be contacted until a background investigation is initiated
2. From:	Job Title:
To:	_ Supervisor's Name:
Phone: ()	Employer:
Address:	
Describe Job Duties:	

Reason for Leaving:

3. From:	Job Title:
To:	Supervisor's Name:
Phone: ()	Employer:
Address:	
Describe Job Duties:	
Reason for Leaving:	
Were you every discharge	ed or asked to resign from any position you held? Yes No
If ves. state circumstance	s:
,,	
Do you have any relatives	employed by the Novato Fire Protection District? Yes No
If yes, please state their r	ame, relationship to you, and position in which they are currently employed:

ADDITIONAL INFORMATION

Based upon your education and experience, please describe the skills, knowledge and abilities which qualify you for this position:

EQUAL OPPORTUNITY EMPLOYER

The Novato Fire Protection District accepts for employment and promotes its employees without regard to race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), age, marital status, national origin, ancestry, genetic information, disability, veteran status, or an unfavorable discharge from military service, and bases appointments and promotions on merit, experience, and other qualifications applied fairly to all applicants and in accordance with State and Federal law.

I certify that the information contained in this application is true to the best of my knowledge
and belief. I understand that any misrepresentation of fact, as stated or implied, on this or any
other employment form will be sufficient reason not to hire me and will be cause for my dismissal.
I understand the Novato Fire Protection District is in no way obligated to provide employment
and that I am in no way obligated to accept employment. This application does not bind either

party for a specific period of time regarding employment and the statements herein do not

Signature of Applicant: ______ Date: _____

constitute any sort of contract of employment.

SUPPLEMENTAL QUESTIONNAIRE

Position Applied For:	Date:
Position Applied For:	Date:

In accordance with Section 1233 of the State Government Code and Section 1420 of the State Labor Code, the information requested below will be used for statistical purposes only. It will enable the Human Resources Division to more effectively evaluate the recruitment process in meeting affirmative action goals, and to determine if there is any adverse impact in the selection process on groups protected under federal and state equal opportunity laws. This information is requested on a voluntary basis and will not be retained as part of your application. If you have any questions regarding this request, please contact the Human Resources Division. Your application will be processed whether or not you complete these questions.

PLEASE DO NOT PLACE NAME ON THIS FORM

Male	Female	
Ethnic Category		
African American		
Asian		
Caucasian		
Hispanic or Latino		
Native American or A	Alaska Native	
Native Hawaiian or c	other Pacific Islander	
Referral Source		
Posted Job Announcemer	nt (list where posted):	
Professional Journal (nam	ne):	
Website (name):		
Friend or Relative:		
Other:		



Novato Fire Protection District

95 Rowland Way Novato, California 94945-5054

Name:
Please complete the NFD application and attach copies of the documents listed below.
Position Applied For: Reserve Firefighter
Required Documents:
Original, signed copy of the Novato Fire District Employment Application
Detailed Résumé
Copy of high school diploma, GED certificate, or transcripts (college transcripts or diplomalso accepted)
Any licenses or certifications pertinent to the position
DD 214 Long Form (Required for all former military personnel)