



# FAIR GROVE FIRE PROTECTION DISTRICT

P.O. Box 103  
Fair Grove, Missouri 65648  
Phone: (417) 759-7908  
Fax: (417) 759-1160  
[www.fairgrovefire.org](http://www.fairgrovefire.org)

**INSTRUCTIONS:**

Type or print your answers to all questions listed on the application. The Fair Grove Fire Protection District requires that all individuals interested in employment complete and official application and will accept a professional resume as a supplement to the application form. Applicants must attach copies of all supporting documentation to the official application.

Position Applying For: \_\_\_\_\_

## SECTION 1: Personal Information

<b>Position for which you are applying (one per application):</b> <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Volunteer _____	<b>Date:</b> _____
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**Please tell us, how did you find out about this position?**

FGFPD Website       Other Website: \_\_\_\_\_       FGFPD Employee: \_\_\_\_\_  
 Published Ad       Other: \_\_\_\_\_

**Please complete (enter all applicable information and check one (1) preferred method of contact):**

Home Phone \_\_\_\_\_       Work Phone \_\_\_\_\_  
 Cell Phone \_\_\_\_\_       E-Mail Address: \_\_\_\_\_

**Name (Last, First, Middle)** \_\_\_\_\_

<b>Street Address</b> _____	<b>Apt./Suite</b> _____	<b>Have you ever worked or volunteered for the FGFPD?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No  <b>Date From:</b> _____ <b>Date To:</b> _____
<b>City</b> _____	<b>State</b> _____	
<b>Zip Code</b> _____		

<b>Are you legally authorized to work in the U.S.?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Can you provide evidence of your eligibility to work?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
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**Do you have relatives employed by the Fair Grove Fire Protection District?**       Yes       No

**If so, list name(s) and relationship(s)?** \_\_\_\_\_

**Do you have a valid Missouri Driver's License?**       Yes       No

The Fair Grove Fire Protection District will verify all information, including moving violations.

<b>High School / G.E.D.</b>	<b>Do you have a High School Diploma or G.E.D. Certificate?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No Prior to an interview, the District may require official copies of college or university transcripts or High School or G.E.D. Certificate or Diploma, or professional certificates.
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	Name	Major	Date (From)	Credit Hours
College or University	Location	Minor	Date (To)	Degree/Certificate
College or University	Name	Major	Date (From)	Credit Hours
	Location	Minor	Date (To)	Degree/Certificate
College or University	Name	Major	Date (From)	Credit Hours
	Location	Minor	Date (To)	Degree/Certificate

**List all applicable certificates and/or licenses.** \_\_\_\_\_

*(You may attach a separate sheet if needed)*

**SECTION 2: Employment Record**

Beginning with current or most recent dates, provide a comprehensive description of your professional experience.  
If you require additional space, attach an additional sheet to this document.

**Current or Most Recent Employer**

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Total Time Employed \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Phone \_\_\_\_\_  
Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties \_\_\_\_\_  
Reason For Leaving \_\_\_\_\_

**Previous Employer**

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Total Time Employed \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Phone \_\_\_\_\_  
Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties \_\_\_\_\_  
Reason For Leaving \_\_\_\_\_

**Previous Employer**

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Total Time Employed \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Phone \_\_\_\_\_  
Title \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties \_\_\_\_\_  
Reason For Leaving \_\_\_\_\_

Have you ever been in the military?  Yes (If yes, attach a copy of your DD214)  No  
Branch: \_\_\_\_\_ Dates of Service (From and To): \_\_\_\_\_  
Type of Discharge Received: \_\_\_\_\_

Have you ever been arrested?  Yes  No  
Have you ever been convicted of a felony?  Yes  No  
Have you ever been convicted, plead guilty or no contest, or placed on deferred adjudication or probation for any offense other than minor traffic violations?  Yes  No  
Please provide details (charges, penalties, where, when and disposition) \_\_\_\_\_

**By signing below, I certify, authorize, or acknowledge:**

That all of the information provided by me on this application for employment and any attachments or supporting documents I submit are accurate. Recognizing that the Fair Grove Fire Protection District may rely on information I provide to make an employment decision, I hereby certify that all information herein presented is accurate and free from intentional omission, falsification, or misleading information.

I authorize the Fair Grove Fire Protection District to conduct background, personal, criminal, employment history, or any type of investigation it may require to determine my fitness for the position in which I have applied. Additionally, I understand that the District may require a physical, mental, or drug pre-employment screening after the District has made a conditional offer for employment.

All application materials, including transcripts, become property of the Fair Grove Fire Protection District and will not be returned.

\_\_\_\_\_

**Signature of Applicant**

\_\_\_\_\_

**Printed Name of Applicant**

\_\_\_\_\_

**Date**