

**CIVIL SERVICE COMMISSION
SHELBY, OHIO
APPLICATION FOR FIREFIGHTER**

Please print your name below.

FIRST NAME

MIDDLE

LAST

FOR: Firefighter for the Fire Department

Instructions to applicant:

Fill in completely – use typewriter or print in black ink.

Failure to give truthful or complete information will result in rejection of your application or in your removal from your position if you receive the appointment.

Applicants must be 18 years of age, nor older than 41 years of age as per ORC 124.42

Applicants must provide a valid Ohio Drivers License

Applicants must have a high school diploma or general education degree (GED)

Candidates may be required to pass a physical ability test

Candidate(s) may go through an interview process and background check.

CITY OF SHELBY IS AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

FIRST NAME	MIDDLE	LAST
ADDRESS _____		
CITY _____	STATE _____	ZIP _____
HOME PHONE _____		CELL PHONE _____
EMAIL ADDRESS _____		
How long have you been a resident at the above address? _____		
If less than four years, give previous address: _____		
Are you legally authorized in the United States Yes _____ No _____		
Are you 21 years or older? Yes _____ No _____		
Name and address of person to notify in an emergency:		

Do you drink intoxicating liquors? Yes _____ No _____		
To what extent? _____		
Did you ever serve in any branch of the Armed Forces? Yes _____ No _____		
Branch _____		Length of Service _____
Primary Duties		

EDUCATION	SCHOOL NAMES & LOCATIONS	NUMBER OF YEARS ATTENDED	COURSE OF STUDY	GRADUATE	LAST YEAR ATTENDED
Grammar School					
High School					
College Or University					
Night School					
Other Schools					

Have you ever before FILED AN APPLICATION for the position of Firefighter in the City of Shelby? Yes _____ No _____ If so, state when: _____

List below complete work history for the last five years starting with your present position and working back. List periods of unemployment.

Occupation	From – To	Name & Address Of Employer	Reason For Leaving	Part Time / Full Time

Give names and addresses of five references, other than relatives of city employees, and the length of time they have known you:

In the space below, describe any special qualifications in training and experience you have had that in your opinion will qualify you for the position for which this application is filed.

RELEASE

I understand that as an applicant for the position of firefighter, I will be subject to a background investigation that will include a reference and credit check. I hereby give consent and authorize the Employer to conduct any investigation the Employer deems necessary.

I further authorize any past employer and any school I have attended to release my employment and/or education records to the City of Shelby.

STATE OF OHIO)

)ss

RICHLAND COUNTY)

Print Name below

_____, being first duly sworn, says that the statements in the foregoing application are true, as he/she verily believes.

Signature below **(Before the notary only)**

Sworn to before me and subscribed in my presence this _____ day of

_____, _____.

Notary Public

Seal