



Established 1949

# PLACER HILLS FIRE PROTECTION DISTRICT

P.O. Box 350 Meadow Vista CA 95722  
 Phone: (530) 878-0405 Fax: (530) 878-0959 email: phfd@usamedia.tv  
 An equal opportunity/affirmative action employer

## EMPLOYMENT APPLICATION

JOB TITLE:		
NAME (LAST, FIRST, MIDDLE)		SOC. SEC. #:
MAILING ADDRESS:		CITY: STATE/ZIP
STREET ADDRESS if different:		DATE OF BIRTH:
PHONE#:	CELL/PAGER#:	EMAIL
CDL:	EXPIRATION DATE:	CDL ENDORSEMENTS
VEHICLE INSURANCE CARRIER:		
OCCUPATION:	EMPLOYER:	WORK#:
EMERGENCY CONTACT:	RELATIONSHIP:	PHONE#:

### EDUCATION

SCHOOL	NAME AND LOCATION	GRADUATED		MAJOR SUBJECTS	GPA
		YES	NO		
HIGH SCHOOL					
COLLEGE/ UNIVERSITY					
OTHER (SPECIFY)					

### MEDICAL TRAINING

CERTIFICATION	EXPIRATION DATE	CERTIFICATION	EXPIRATION DATE

CURRENT IMMUNIZATIONS (circle appropriate answer)					
DIPHTHERIA/TETANUS	YES	NO	HEPATITIS B	YES	NO

CONFIDENTIAL INFORMATION (circle appropriate answer)	
Have you ever been convicted of a felony?	YES NO
If yes, explain:	
Are you currently on probation?	YES NO
If yes, explain:	

ALL APPLICANTS MAY BE SUBJECT TO A BACKGROUND CHECK. ANY FALSIFICATION OF THIS DOCUMENT MAY BE GROUNDS FOR IMMEDIATE DISMISSAL FROM THE DEPARTMENT.

I (print name) \_\_\_\_\_ certify that all statements in this application are true and correct. I hereby authorize the Placer Hills Fire District to verify the accuracy of the information I have provided on this application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_