



**TOWN OF BERLIN CALL FIREFIGHTER
APPLICATION FOR EMPLOYMENT**

Fire Department of Interest: Berlin East Berlin Kensington South Kensington
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The Town of Berlin is an equal employment opportunity/affirmative action employer and intends to recruit, hire, train and promote without regard to race, color, sex, age, religion, national and ethnic origin, disability, marital status, sexual orientation, veteran status or any other protected class under applicable law.

 Name (Last) (First) (Middle Initial)

 Address (Street Name and Number) (City) (State) (Zip Code)

 Telephone Number - Daytime Telephone Number – Evening Cell Phone

 Social Security Number Drivers License Number & Type Expiration Date

 E-mail Address Date of Birth

Are you either a United States Citizen or authorized to work in the United States? Yes _____ No _____

Please check which status you are applying for: Cadet Status _____ Active FF Status _____

EMPLOYMENT INFORMATION

Please provide your employment information.

Place of Employment: _____ Position: _____

May we contact your employer? Yes ___ No ___ Contact Name: _____ Phone: _____

Previous fire fighting experience: _____ years Department: _____

Chiefs Name: _____ Phone Number: _____

List any special skills and/or trade or professional licenses relevant to the job applied for:

SPONSORING MEMBERS

Please provide signatures from two sponsoring members from the Fire Department to which you are applying.

1) _____
 Print Name Signature

2) _____
 Print Name Signature

REFERENCES

List two references from the Town of Berlin other than sponsoring members who can provide first-hand knowledge directly related to your **qualifications for the job** for which you are applying.

Name	Phone Number	Relationship to You	# of Years Known

PRE-EMPLOYMENT REQUIREMENTS

Any person applying for a Town of Berlin Call Fire Fighter position will be required to comply with the following (please initial to acknowledge your acceptance):

____ Complete a physical exam which includes a drug screen. (Candidates will have two months from the date
Initial of hire to have their physical and drug screen completed. Failure to comply without adequate notice to the Board of Commissioners or the Chief will result in termination of said application.)

____ Agree to abide by the By-laws of the individual fire department for which you are applying.
Initial

____ Agree to become familiar with the standard Operating Procedures and Guidelines of the fire department for
Initial which you are applying.

____ Membership is contingent upon successful completion of a probationary period as described in the By-
Initial Laws of the individual fire department for which you are applying.

Please Read Carefully Before Signing

I certify that this application has been completed truthfully and without evasion or omission on my part. I hereby authorize the Town of Berlin or its agents to investigate any or all of my statements, including references, in considering me for the position of Call Fire Fighter.

I understand that any false statements, misrepresentations, or omissions made by me on this application may result in rejection of this application or dismissal after acceptance. I further understand that this application form is not a contract of employment.

Pursuant to the Immigration and Reform Control Act of 1986, all applicants, upon being made an offer of employment, must produce documentation specified by the federal government establishing identity and authorization of employment in the United States. This documentation must be produced no later than 72 hours following commencement of employment. I will be required to sign a Form I-9 (Employment Eligibility Verification) verifying, under oath, my employment authorization.

I understand that the Town of Berlin adheres to the principle of "employment at will", which allows either party to terminate the employment relationship at any time for any reason. If hired, I agree to abide by any and all Town of Berlin and Fire Department policies, procedures and regulations.

Signature

Date

Thank you for completing this application form and for your interest in the Town of Berlin Call Fire Fighter position. Employment will be subject to satisfactory reference evaluation and any other pre-employment exams that are appropriate for the position.

For Fire Department Use Only (Optional)

Date Application Received: _____

Date of Action: _____

Action taken (B.O.D. or Investigating Committee):

Date of Action Taken by Department following Probation: _____

Recommendation of the Department:

Date of Action Taken by the Department for full Membership: _____ Accepted Rejected