

APPLICATION FOR EMPLOYMENT

Please provide complete and legible information. An incomplete application may affect your consideration for employment. If necessary, attach a separate sheet for additional information.

Ellis County Emergency Service District #6 (“District” or “ESD”) is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee based on race, color, religion, creed, national origin or ancestry, ethnicity, sex, age, physical or mental disability, veteran or military status, genetic information, citizenship, marital status or any other legally recognized protected basis under federal, state, or local law. The information collected by this application is to determine suitability for employment.

Applicants with disabilities may be entitled to reasonable accommodation under the Americans with Disabilities Act and Texas law. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing undue hardship on Ellis County Emergency Service District #6. Please inform the District’s Commission if you need assistance completing this application or to otherwise participate in the application process.

Full Name (First, Middle, and Last) _____ Date _____

Full Address (Street, City, State, and Zip Code) _____

Phone Number (____) _____ Alternate Contact Number (____) _____

Date available for work _____

Email _____

Are you legally authorized to work in the United States? ____ Yes ____ No

Do you now, or will you in the future, require immigration sponsorship for work authorization (e.g., H-1B)? ____ Yes ____ No (If hired, verification will be required consistent with federal law.)

Are you at least 18 years old? ____ Yes ____ No

(If no, you may be required to provide authorization to work.)

If hired, would you have a reliable means of transportation to and from work? ____ Yes ____ No

Do you have a driver's license? ____ Yes ____ No ____ Operator ____ Commercial (CDL)

Driver's license number _____ State of issue _____

Expiration date _____

If hired, do you reside in Ellis County, or commit to relocate to Ellis County within 90 days if your date of hire? ____ Yes ____ No

POSITION INFORMATION

Position applied for: Fire Chief

Salary range expected (optional to answer): _____

Applying for: _____ Full-time _____ Part-time _____ Seasonal/Temporary

EDUCATION

Type of School	School Name and Location	Highest Grade Completed	Diploma, Degree, or Certificate Received	Course of Study or Major
High School (or G.E.D. equivalent)				
College or University				
Graduate School				
Vocational or Trade School				
Other				

BACKGROUND INFORMATION

During the past twenty years, have you ever been terminated, suspended, or asked to resign from any position? _____ Yes _____ No

If yes, please explain. _____

For the purpose of verifying information on this application, have you ever worked or attended school under a different name at any of the companies or institutions you have listed? _____ Yes _____ No

If yes, specify name. _____

The District will consider qualified applicants, including those with criminal histories, in a manner consistent with federal, state, and local fair chance laws.

EMPLOYMENT RECORD

List all employment experience for the past ten years, starting with the most recent or present employer, including U military service or training. Using a separate section for each position, describe in detail all work experience. **You may include as part of your employment history any verifiable work performed on a volunteer basis. Resumes may not be substituted in place of completing the following employment information.**

Current Employer _____ _____	Phone _____ From (month and year) _____ _____
Geographic Location _____ _____	To (month and year) _____ _____
Your Position _____ _____	Reason for leaving: _____ _____
May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Supervisor's Name/Title _____ _____	
Primary Responsibilities _____ _____ _____	

Employer _____ _____	Phone _____ From (month and year) _____ _____
Geographic Location _____ _____	To (month and year) _____ _____
Your Position _____ _____	Reason for leaving: _____ _____
Supervisor's Name/Title _____ _____	
Primary Responsibilities _____ _____ _____	

Employer _____ _____	Phone _____ From (month and year) _____ _____
Geographic Location _____ _____	To (month and year) _____ _____
Your Position _____ _____	Reason for leaving: _____ _____
Supervisor's Name/Title _____ _____	
Primary Responsibilities _____ _____ _____	

PERSONAL/PROFESSIONAL REFERENCES

List three personal or professional references (other than those listed as a current or former supervisor) that we may contact:

Name _____ Email Address _____	Phone No. (_____) _____ Type of Acquaintance _____ _____
Name _____ Email Address: _____	Phone No. (_____) _____ Type of Acquaintance _____ _____
Name: _____ Email Address: _____	Phone No. (_____) _____ Type of Acquaintance _____ _____

Have you received the job description for the position you are applying for? ____ Yes ____ No

Are you able to perform all of the essential functions of the position with or without reasonable accommodation? ____ Yes ____ No

Have you worked for Ellis County Emergency Service District #6 before?

____ Yes ____ No

If yes, at what location? _____ Job title: _____

Have you signed or otherwise agreed to any non-solicitation, non-compete, or other similar post-employment restriction or agreement with your current or any prior employer? ___ Yes ___ No If yes, explain: _____

ACKNOWLEDGMENTS AND CERTIFICATIONS

PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING

I understand that, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment drug test, including for cannabis (marijuana), after receiving a conditional offer of employment and must receive a negative test result before being permitted to commence work with Ellis County Emergency Service District #6.

_____ Initials

I understand that, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment medical examination after receiving a conditional offer of employment and must meet the qualifications for the position, with or without reasonable accommodation, before being permitted to commence work with Ellis County Emergency Service District #6.

_____ Initials

I understand that, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment background check after receiving a conditional offer of employment to investigate my criminal background, driving record, credit history, and other matters related to my suitability for employment. I understand that a separate disclosure and consent form will be provided to me prior to any background check.

_____ Initials

I understand that employment with Ellis County Emergency Service District #6 is contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

_____ Initials

I authorize Ellis County Emergency Service District #6 and its representatives to contact my current and former employers (with the exception of my current employer, if I have marked "May we contact?" on this application as "No"), schools, references, and other persons I have named in this application for the purpose of verifying the information I have provided. I release my current and former employers, schools, references, and other persons named in this application from any liability resulting from the information released. I authorize employers, schools, and other persons named in this application to provide any information or transcripts requested.

_____ Initials

I hereby certify that, if employed, my employment with Ellis County Emergency Service District #6 will not conflict with, violate, breach, or result in default under, any contract, agreement, or understanding that I am a party to or am bound by, including any non-solicitation, non-compete, or other similar post-employment restriction or agreement I have with any current or former employer, other than the contracts, agreements, covenants, or understandings I have disclosed in this application, if any.

_____ Initials

I understand and agree that, if hired, my employment will be at will, which means employment is for an indefinite period of time and may be terminated by myself or Ellis County Emergency Service District #6 at any time, with or without cause, and with or without notice.

_____ Initials

I certify that all of the above information is true and complete and I understand that any falsification or omission of information made by me may disqualify me from further consideration for employment or, if hired, may result in my termination at any time during the period of my employment, regardless of the amount of time that has passed.

_____ Initials

Note: An offer of employment is conditioned upon complying with Ellis County Emergency Service District #6's requirements including, but not limited to, signing a separate disclosure and consent form prior to any background check.

MY SIGNATURE IS EVIDENCE THAT I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.

Applicant's signature _____ Date _____