

Marseilles Fire Protection District Application

Please **PRINT** all information in block capital letters.

(Applicant Section)			Personal Information
Last Name:	First Name:	Middle Name:	
Current Address (No P.O. Box):			Sex:
Home Phone: ()	Work Phone: ()	Driver License No.:	Driver License Class:
Date of Birth (MM-DD-YYYY)	Place of Birth		Social Security Number
/ /			-- --
E-Mail :			
Military Service and Employment History			
Military Service: From:		To:	Branch of Service:
Type of Discharge:			
Present Employer:	Supervisors Name:	Supervisor's Phone:	
Work Address:			Position Held:
How Long with Present Employer:			
If less than five (5) years with present employer, list previous employer(s). List most recent first.			
Employer Name:	Address:	Phone: ()	Reason for Leaving:
Employer Name:	Address:	Phone: ()	Reason for Leaving:
Employer Name:	Address:	Phone: ()	Reason for Leaving:
Employer Name:	Address:	Phone: ()	Reason for Leaving:
Work Schedule:		Shift Length: Example: 8 Hour Shift	

(Applicant Section)

Firefighting Experience and Training

Have you previously been a member of one (1) or more Fire Departments or Fire Brigades? Yes No

Member

Fire Department/Company Name	Address	From	Until

Have you attended any fire fighting schools previously? Yes No
If yes, include copies of any certificates you have received with this application.

References

Have you applied to the Marseilles Fire Protection District previously? Yes No

Are you now a member of another fire department or brigade? Yes No

List any firefighters with the Marseilles Fire Protection District with whom you are acquainted.

List three (3) references, other than relatives and any named above:

Name	Address(Street, City, State, Zip)	Phone
		()
		()
		()

Emergency Contact Information	Relationship
()	
()	
()	

Marseilles Fire Protection District

205 Lincoln Street • P.O. Box 4
MARSEILLES, ILLINOIS 61341
Telephone (815) 795-5535

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, _____, do hereby authorize a review and full disclosure of all records concerning myself to any duly authorized officer of the Marseilles Fire Protection District, and the Marseilles Police Department, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for a full and complete disclosure of records of law enforcement agencies, financial institutions, medical and psychiatric treatment and/or consultations, including background reports, efficiency ratings, complaints or grievances filed by or against me and the records and recollections of attorneys-at-law or of other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly in whole or in part, upon this release authorization will be considered in determining my suitability for appointment as a firefighter of the Marseilles Fire Protection District fire department. I also certify that any person(s) who may furnish such information shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of such information. I further release the Marseilles Fire Protection District fire department, and the Marseilles Police Department, and all of its agents and/or employees from any and all liability which may be incurred as a result of collecting such information.

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I have read and fully understand the contents of this "Authorization for Release of Personal Information". I also understand that all information obtained will be kept confidential within my personnel file.

SIGNATURE: _____ WITNESS: _____

ADDRESS: _____ DATE: _____

SOCIAL SECURITY NUMBER: _____

PHONE: _____

DATE OF BIRTH: _____

MFPD

