

Last Name		First Name		Middle Name		
()	()					
Cell Phone Number	Other Cont	act Number	E-m	nail Address		
Current H	ome Address		Previous Home Address			
City	State	Zip code	City	State	Zip code	
Are you at least 18 ye	ears old?	Yes No	Date of Birth	Height	Weight	
Do you have a valid Drivers License? Yes No Social Security Number						
Drivers License Number State Class Expiration Date						
Are you authorized to work in the United States? Yes No						
Are you willing to respond to calls day or night? Yes No						
Firefighters at the Lady's Island - St. Helena Fire District work on a rotating shift schedule; on duty for 48 hours (which can include holidays and/or weekends) followed by 96 hours off duty. Are you able and willing to work on such a schedule? Yes No						
Are you willing/able to respond to departmental recalls such as in the case of, but not lim- ited to, hurricanes or other major disasters?						
Firefighting is a hazardous, physically and mentally taxing profession. Do you posses any physical, medical or psychological impairment or disability that would, with reasonable accommodation, limit your job performance as a firefighter?						
Return completed application to the Administrative Assistant at: 146 Lady's Island Drive, Beaufort, SC 29907 or Jameson@staff.lishfd.org						

Application must be legible, truthful and completed using blue or black ink

Have vou	ever been	convicted of	of a	crime.	excludina	minor	traffic	violations?
	010100011	00111101001		011110,	exere an ig			

Yes No

If yes, please explain:

Why are you applying for this position?

EDUCATION	1
-----------	---

<u>Circle highest level of</u>		
education earned		
High School	Name of High School	Date Graduated
Some College		
Associates Degree		
Bachelor's Degree	Name of College / University	Date Graduated
Master's Degree		
PhD	List any special skills or certifications:	
Other		
* Please attach a copy of your certificates, de-		
grees, and/or		
diplomas		

WORK HISTORY

Most Recent E	mployer					
		Company Name	City	State		
Start Date	End Date	Job Title	Salary			
		Description of duties				
Immediate Supervisor		Reason for leaving				
Supervisors	phone number	Are you currently working for this employer? Yes May we contact this employer? Yes No				
Next Most R						
<u>Employ</u>	<u>ei</u>	Company Name	City	State		
Start Date	End Date	Job Title	Salary			
		Description of duties				
Immediate Supervisor		Reason for leaving				
Supervisors	phone number	Are you currently working for thi May we contact this employer?		No		

Summarize any special employment qualifications:

BACKGROUND INFORMATION

Under the South Carolina Code of Laws §40-80-20 (A)(1) "Prior to employment of a paid or volunteer firefighter, the fire chief or other employer must ensure that a prospective firefighter undergoes a criminal records check..." Certain circumstances and/or convictions may preclude an individual from being a firefighter. By completing this employment application you are acknowledging this requirement and authorizing the Lady's Island - St. Helena Fire District and/or its designee to conduct such a background check.

REFERENCES	
 First & Last Name	Phone Number
 Address	Relationship
 First & Last Name	
 First & Last Name Address	Phone Number
 First & Last Name	Phone Number
 Address	Relationship
 First & Last Name	Phone Number

List any additional information you feel might be beneficial to the Fire District when considering your application

With my signature below;

- I am certifying that I understand this application is to be used in the determination of my eligibility for employment only. It is not an offer of employment or any form of contract, nor is it to be understood as such.
- I understand that any false or misleading statements on this application and/or throughout the hiring process may disqualify me from employment, or if such deception is discovered after employment begins, it may be grounds for immediate termination. I hereby certify that all the forgoing answers and statements are true and accurate to the best of my knowledge.
- I understand the legal requirements of SC §40-80-20 and do hereby authorize the Lady's Island-St. Helena Fire District (Fire District), and/or its agents, which may include third party organizations, to conduct a criminal background check. Further, I explicitly authorize the Lady's Fire District and/or its representatives to verify any information contained within this document. Additionally, I authorize any friends, relatives, employers, schools, law enforcement agencies and/or other organizations referenced herein to provide any work history, legal, and character information to the Fire District and/or its representatives.
- I understand that the Fire District is an "AT WILL" employer and may resend any offer of employment at any time and for any reason. I understand that I may likewise end my employment relationship and/or resend my application at any time and for any reason.
- If an offer of employment is extended, I understand that I must submit to a drug screen, tuberculosis test, and physical examination by a licensed medical professional. These tests will be conducted at a time and location to be determined by the Fire District. I understand that any failure to pass all the above named testes may disqualify me for employment with the Fire District.
- Employment applications my be received by the Fire District on a regular bases **but** prospective employees will only be contacted if there is an open position, and their application indicates that they will be a viable candidate for that particular position.