

WILDLAND FIREFIGHTER APPLICATION

	APPLICANT	INFOR	MATION		
Full Nam	ne:		Date of Birth:		
Physical Address:	Last First				
Mailing Address:	Street Address			Apartment/Unit #	
	City		State	ZIP Code	
Address.	Street Address			Apartment/Unit #	
	City		State	ZIP Code	
Home Phone:		_ Cell	Phone:		
Email Address:			Date Available:		
Do you h	nave or can you obtain a Washington state drive	er's licer	nse? YES	NO	
Have you	u ever been convicted of a felony?	s 🗆	NO		
If yes, ex	xplain:				
	SKILLS AND	EXPE	RIENCE		
Please i	ndicate if you have any of the following skill	s or tra	ining:		
	CPR		Highway Safety and Fla	gging	
□ F	First Aid		Communications and R	adios	
□ F	Fire Safety Systems (alarms, extinguishers)		Certified Trade (mechai	nic, electrician)	
F	Rescue Procedure (lifeguard, auto extrication)		Occupational Health and Safety		
	Commercial Driver's License (CDL)		Other		
Please e	explain any previous firefighter experience:				

List below valid licenses or certificates of professional or vocational competence relevant to the position for which you are applying:

	License/Certificate	License/C	ertificate Number	Expiration [Date
1.					
2.					
3.					
		EDUCATIO)N		
High Schoo	ool: Highest Grade Level Achieved:				
From	To	Did you graduate? YES	☐ NO Diploma:		
College:		Cou	rse of Study:		
From	To	Did you graduate? YES	☐ NO Degree		
Other:		Cour	se of Study:		
From	To	Did you graduate? YES	☐ NO Degree		
		EMPLOYME	NT		
Please list	any relevant (or mo	st recent) employment:			
Company N	ame:		From	То	
Address:			Phone Number:		
Supervisor:		N	lay we contact for a reference?	☐ YES	□ NO
Job Title: _					
Responsibil	ities:				
Reason for	Leaving:				
Company N	ame:		From	To	
Address:			Phone Number:		
Supervisor:		N	lay we contact for a reference?	☐ YES	□ NO
Job Title: _					
Responsibil	ities:				
Reason for	Leaving:				

Additional, relevant employment may be attached.

REFERENCES Please list three professional references: Full Name: ______ Relationship: _____ Company: _____ Phone Number: _____ Full Name: ______ Relationship: _____ Company: Phone Number: Address: Full Name: _____ Relationship: _____ Company: _____ Phone Number: _____ MILITARY SERVICE From: To: Rank at Discharge: _____ Type of Discharge: _____ If other than honorable explain: DRIVING RECORD Full Name: Last First Driver's License Number: State: List all notices of infractions or traffic citations (other than parking tickets) that you have received within the last five (5) years: State Month and Year Type of Infraction 1. 2. 3. Infractions or citations will not necessarily remove you from consideration. MISCELLANEOUS How did you hear about this opportunity? Word of Mouth:

	Website:					
	Advertisement In:					
	Social Media:					
	Other:					
	NOTICES					
qualific age, d	orth Mason Regional Fire Authority (NMRFA) is an equal eneed candidates will receive consideration without regard to racisability, marital status, political affiliation, sexual orientation casonably accommodate candidates with disabilities as require	e, color, religion, sex, national origin, or any other non-merit factor. NMRFA				
NMRFA is a smoke and drug-free workplace.						
	DISCLAIMER AND SIGNATUR	RE				
I certify that my answers are true and complete to the best of my knowledge. I am not engaged in any outside activity or business that could be considered a conflict of interest with the NMRFA or those of its clients, nor will I become engaged in such activity or business if selected for the position for which I am applying.						
crimina refere	For determination of my potential membership eligibility, I hereby authorize release of educational, police criminal and employment information pertinent to the position for which I am applying and to contact any references I have listed within my application. I further authorize the North Mason Regional Fire Authority to rely upon and use, as it sees fit, any of the information received.					
I hereby release all parties and persons connected with any such request for information from all claims, liabilities and damages for any reason arising out of furnishing such information. If employed, I release the NMRFA from any liability for future references it may provide regarding my employment with the NMRFA. Pursuant to RCW 43.43.834, background checks are available to the applicant upon request. It is my intention that any copy of this authorization is as valid as the signed original.						
Signat	ure:	Date:				

Completed applications can be sent via email, fax, mail or hand delivered to:

Attn: Angie McCormick-Executive Assistant
North Mason Regional Fire Authority
490 NE Old Belfair Hwy
PO Box 277
Belfair, WA 98528

Phone: 360-275-6711 Fax: 360-275-6224 Email:

amccormick@northmasonrfa.com