

## Lady's Island—St. Helena Fire District Employment Application for:

For Office Use Only:	
Received Date:	

Last Name		First Na	me		Middle Nar	ne
( )	( )					
Cell Phone Number	Other Contact N			E-mail Addr	ess	
Current Ho	ome Address			Previous Home	Address	
City	State Zij	ip code	Cit		 State	Zip code
City	Sidie Zij	p code	Cii	y	Sidio	ZIP COGC
Are you at least 18 ye	ears old? Ye	es No	Date of Bir	 th Heiç	 ght	Weight
Social Security I		Do you hav	e a valid Dri	ivers License <sup>s</sup>	? Ye	s No
Drivers License	 e Number		 tate		Expir	ation Date
DIITOIS LICOTISC	) NOTHIOG	<u> </u>			LAPII	anon bare
Are you authorized to	) work in the Unit	ted States?	Yes	No		
Are you willing to respond to calls day or night? Yes No						
Firefighters at the Lac	dy's Island - St. He	elena Fire D	istrict work c	n a rotating	shift sche	edule; on
duty for 48 hours (wh				nds) followed	d 69 yd b	ours off
duty. Are you able a	and willing to wor	rk on such a	schedule?	Yes	No	
Are you willing/able tited to, hurricanes or	•	•	recalls such	as in the ca No	se of, bu	ıt not lim-
Firefighting is a hazar	dous, physically	and menta	lly taxing pro	ofession. Do	you poss	ses any
physical, medical or	psychological in	npairment o	r disability th	nat would, w	ith reaso	nable
accommodation, lim	nit your job perfo	rmance as (	a firefighter?	Yes	No	
Return o	completed appli	lication to th	ne Administro	ative Assistar	nt at:	
146 Lady	y's Island Drive, B	3eaufort, SC	29907 or D	oimitrov@lishf	d.org	

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

Have you ever been o	convicted of a crime, excluding minor traffic vic	olations?
Yes No		
If yes, please explain:		
Why are you applying	for this position?	
		_
	EDUCATION	
Circle highest level of 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		
f Please attach a copy of your certificates, de- grees, and/or diplomas		

WORK HISTORY		
Company Name	City	State
Job Title	Salary	
Description of duties		
Reasor	n for leaving	
		No
Company Name	City	State
Job Title	Salary	
Description of duties		
Reason	n for leaving	
		No
May we comact mis employe	El tes INO	
ployment qualifications:		
	Company Name    Job Title	Company Name  City  Description of duties  Reason for leaving  Are you currently working for this employer? Yes  May we contact this employer? Yes No  Company Name  City  Description of duties  Reason for leaving  Are you currently working for this employer? Yes  May we contact this employer? No

## **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	Phone Number
Address	Relationship
First & Last Name	Phone Number
Address	Relationship
First & Last Name	Phone Number
Address	Relationship

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.

Applicant Signature	Today's Date