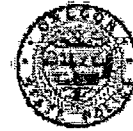




Oregon  
Open Records



Frequently Asked Questions (FAQ)

# SUBJECT INFORMATION:

Incorrect or missing information may delay your request.

**NOTE:** NO punctuation. (Example: Enter Jones-Smith as a single name: JONESSMITH)

*Subject's Last Name*

*Subject's First Name*

*Subject's Middle Name*

Subject's mailing address is **REQUIRED**. Without this information, we can not complete your request.

*Subject's Street Address*

*Address (cont.)*

*City*

*State*

*Zip Code*

*Subject's Date of Birth:* **Month**  (mm)

(*Estimate if unknown.*) **Day**  (dd)

**Year**  (yyyy)

*Subject's Sex*  Male  Female  Unknown

*SSN*  (no dashes)

*Alias or Maiden Name(s) -- No nicknames*

Alias #1: *Last:*  *First:*

Alias #2: *Last:*  *First:*

Alias #3: *Last:*  *First:*

**Employment Purposes:**

Yes  No

**If yes, how was subject notified:**

Written  Verbal  None

# SOUTH LANE COUNTY FIRE & RESCUE

233 E. Harrison Avenue  
Cottage Grove, OR 97424  
[www.southlanefire.org](http://www.southlanefire.org)

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Drivers License # and State of Issuer: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree or Certificate: \_\_\_\_\_

### References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

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## References Continued:

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_

## Previous Employment

*List all work experience including, volunteer, intern, career and military.*

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES  NO  Volunteer  Part-time  Full-time

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES  NO  Volunteer  Part-time  Full-time

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## Previous Employment Continued:

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES  NO  Volunteer  Part-time  Full-time

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES  NO  Volunteer  Part-time  Full-time

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES  NO  Volunteer  Part-time  Full-time

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## Previous Employment Continued:

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO  Volunteer  Part-time  Full-time

## Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in disqualification or dismissal.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## DRIVING & CRIMINAL HISTORY VERIFICATION

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

List Other Names Previously Used: \_\_\_\_\_

Social Security No: \_\_\_\_\_ Oregon Driver's License/Identification Card No: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address/PO City State Zip Code*

- Have you **EVER** been convicted of a sex-related crime?  Yes  No  
*If yes, was the conviction in Oregon or another state? (Please specify if another state.) State: \_\_\_\_\_*  
*If yes, did the crime involve force or minors?*  Yes  No
- Have you **EVER** been convicted of a crime involving violence or threat of violence?  Yes  No  
*If yes, was the conviction in Oregon or another state? (Please specify if another state.) State: \_\_\_\_\_*
- Have you **EVER** been convicted of a crime involving drugs or alcohol?  Yes  No  
*If yes, was the conviction in Oregon or another state? (Please specify if another state.) State: \_\_\_\_\_*
- Have you **EVER** been convicted of any other crime except a minor traffic violation?  Yes  No
- Have you **EVER** been arrested for a crime for which there was not an acquittal/dismissal?  Yes  No

**Advisory:** A check of the applicant's driving/criminal history will be made by South Lane County Fire and Rescue to verify the responses to the preceding questions. All background checks are filed with Oregon State of Police and Oregon Department of Motor Vehicles.

I hereby grant consent to South Lane County Fire and Rescue to check criminal records to verify any statements made on this form.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# **SOUTH LANE COUNTY FIRE & RESCUE**

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## **CERTIFICATION, AUTHORIZATION, RELEASE AND WAIVER** **READ CAREFULLY BEFORE SIGNING**

I certify that the information given by me in the Employment Application is true and complete and I understand and agree that the application process or my employment with SLCFR may be immediately discontinued if misrepresentations, falsified statements or material omissions are found to have been made. I authorize investigatory agencies, schools, former employers and former supervisors to provide any and all information pertinent to my employability, and hereby release those providing such information from any liability for doing so.

I understand that employment, if offered, is contingent upon satisfactory results of a drug screening, employment verification, criminal background check utilizing fingerprint analysis, motor vehicle report and examination as required by the District. I also understand that employment, if offered, is contingent upon my providing additional information for employee record purposes and upon my providing proof of identity and lawful authorization to work in the US. and completing a form I-9. (\*if applicable).

I will comply with and be governed by all federal and/or state laws, and District policies, rules, and procedures as may be in effect. If requested by the management at any time, I agree, while on Fire District property, to submit to the search of my person, possessions, cars, and of any locker that may be assigned to me, and I hereby waive all claims for damages on account of such examination.

I may be required to take a physical examination, at company expense, at any time, to determine if I am physically fit for the job I am to perform, including drug testing for probable cause, random testing, or pre-employment screening. I authorize any physician or hospital to release any information to the Fire District which may be necessary to determine my ability to perform the duties of a job I am being considered for, prior to employment, or in the future, during employment with the company, including drug testing information.

I further understand that this is an application for employment only and that no employment contract of any kind is being offered or implied.

I have read and understand the above \_\_\_\_\_  
Signature Date

# SOUTH LANE COUNTY FIRE & RESCUE

233 E. Harrison Avenue  
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[www.southlanefire.org](http://www.southlanefire.org)

This document authorizes this employer, or its research agent, to seek, and/or verify specific information about my background. I understand that this authorization applies whether I am a current employee, a candidate for employment or seeking to provide services as an independent contractor. I understand that this release authorization will remain in effect for the duration of my employment unless I revoke this release authorization in writing.

I specifically authorize that background information may be sought in the following area, and agree to release from any liability the agencies, prior employers, individuals or other entities which provide the information to the client to the extent that the information given is true and accurate:

- A. Criminal conviction records in any jurisdiction;
- B. Driving record in any state;
- C. Educational and Professional Certification records in any jurisdiction;
- D. Work performance, attendance and job related information.

I agree to assist in this effort by contacting former employers and asking for full disclosure of my employment history.

I further understand that information obtained may be used by this employer in its sole discretion and without liability, to determine eligibility for initial or continued employment, to grant or deny me permission to enter into employer property, or that of its affiliated companies. I further understand that this information will become part of my personnel record at this employer and will be held in the confidence accorded such records.

I acknowledge that I have read and understand this information, that the rules governing its collection and use are pursuant to the Fair Credit Reporting Act as amended by the Consumer Credit Reform act of 1996, and that any adverse action based on this information will be communicated to me in accordance with the Act.

---

Signature

Date

**The following must be filled out completely for your application to be considered (Please print).**

---

Last name

First name

Middle Name

Other names by which you have been known and the dates those names were used.

---

Home address

City/State

Zip code

---

Driver's license number

State Issued



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NAME \_\_\_\_\_

**PLEASE INDICATE WHICH OF THE BELOW QUALIFICATIONS YOU POSSESS.  
 PLEASE ATTACH COPIES OF EACH.**

- ( ) High school graduate or equivalent;
- ( ) Oregon Driver's license;
- ( ) Oregon Paramedic Certification;
- ( ) Certified/Current NFPA FF-1;
- ( ) NFPA Driver;
- ( ) NFPA Pump Operator;
- ( ) Wild land Suppression training (S-130, S-190);
- ( ) Associate Degree in Fire Science;
- ( ) Associate Degree in EMS;

Please list additional certifications below:

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