ESTES VALLEL BUDIESCUE TOT TOT TOT TOT TOT TOT	901 North Sair Estes Park, (970) 577-0900; (97 www.estesva	<b>MENT APPLIC</b> Int Vrain Ave. CO 80517 70) 5770923 (fax)		ONLY:
			Date Received	
NAME (Last, First, Middle	Initial):			
POSITION APPLIED FOR		DATE:		
accurately. No action will b the space provided is not a	complete this application in its entine e taken on this application until all adequate, add another page and ic ay be submitted as additional detail	questions have lentify the addition	been answered. If on a linformation by	
<b>BIOGRAPHICAL INFORM</b>	ATION			
<ul> <li>Name (Last, First,</li> </ul>	Middle):			
<ul> <li>Other names by w</li> </ul>	hich you are (or have been) knowr	ו:		
<ul> <li>Mailing Address:</li> </ul>				
<ul> <li>Home Phone:</li> </ul>	Cell Phone:	(	Cell Phone Carrier:	
<ul> <li>Email Address:</li> </ul>				
<ul> <li>Social Security Nu</li> </ul>	mber:			
<ul> <li>Are you 18 years of MILITARY SERVICE</li> <li>Have you ever been determined.</li> </ul>	of age or older? Yes No en in the United States Military?	Yes	No	
<ul> <li>What Branch of Se</li> </ul>	ervice?	Type of dis	charge?	
EMPLOYMENT HISTORY				
<ul> <li>May we contact yo</li> </ul>	ur current or prior employers?	Yes	No	

If YES, please provide names and contact information.

### DRIVING RECORD

- Do you have a valid driver's license? Yes No
  State: Type: Number: Exp. Date:
- Any Restrictions?
- What other states or countries have you held a driver's license in? List years.
- List all traffic citations you have received in the past 3 years (exclude parking). Give the Date(s), Violation(s), City and State.

### PERSONAL CHARACTERISTICS

Affirmative answers to this question do not automatically disqualify you for this position. Withholding information <u>will</u> be grounds for automatic disqualification.

- Have you ever been convicted of a felony, or any alcohol-related offenses including Driving Under the Influence (DUI)?
   Yes
   No
- If yes, explain in detail. Include date (s) and type of violation (s), City and State.

#### SPECIAL SKILLS AND KNOWLEDGE

List any special skills or knowledge that you would bring to the Estes Valley Fire Protection

District:

### PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

- I certify that all information provided in this employment application is true and complete to the best of my knowledge. I understand that any false information or omissions may disgualify me from further consideration for employment and may result in my dismissal if discovered at a later date.
- I authorize the investigation of my criminal history and any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer (except previously noted), past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.
- I understand that the Estes Valley Fire Protection District may request an investigative consumer report from a consumer-reporting agency. This report may include information as to my character, reputation, personal characteristics and mode of living obtained from interviews with neighbors, friends, former employers, schools and others, I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer-reporting agency so that I may obtain a complete copy of their report.
- I understand that if I am extended an offer of employment, it may be conditioned upon my successful passing one or more pre-employment screenings, including physical examinations, psychological screening, and drug and/or alcohol testing. If required, I consent to the Screenings and the release of any or all medical information as may be deemed necessary to judge my capability to do the work that I am applying. I consent to a pre or post employment drug and/or alcohol screen as a condition of employment if required.
- I understand that this application, verbal statements by EVFPD representatives, or subsequent employment does not create an expressed or implied contract of employment, nor guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without reasoned and with or without notice.

I have read, understand, and my signature consents to these statements.

Signature: Date:

(Applications without signature will be automatically rejected.)



### ESTES VALLEY FIRE PROTECTION DISTRICT PREVENT PREPARE PERFORM

# **Criminal Background Check**

# Please complete the following information:

I,	,	authorize the Estes Valley Fi	re Protection District to
perform a criminal background ch	, eck.		
Name:			
First	Middle	Last	Maiden
Driver's License#:			
Social Security #:			
Date of Birth:			
any felony convictions found will I federal privacy laws, including the	Protection District to conduct a crimin become a matter of public record. I Privacy Act of 1974 with respect to g that any and all information furnish	urther understand and ackno access and disclosure of inf	owledge my rights under ormation and hereby waive
Signature:		Date	9:
For internal staff use			
CBI check performed by:			

Date	CBI check	performed:	

Results of check:

Search Fee \$9.00 Certified Fee (Additional) \$1.00

Certified Record

## Permission to Release Driver Records to Self or Another Person

Driver License Offices provide only personal driving record information. Records and/or other requests are available only at 1881 Pierce St., Lakewood, CO

Pursuant to § 42-1-206(1)(b)(II) (7)(a) and (7)(b)(XIII), C.R.S.

7 Year Driver Record	O Full Driver Record	O Commercial Driver Record
O Other		

If you are requesting a copy of a confidential crash (counter) report (Pursuant to § 42-4-1610, C.R.S.), fill out the following.

Confirmation Number	Date of Crash (MM/DD/YY)

Last Name (Please print)	First Name

I hereby authorize the release of personal information contained in records maintained by the Colorado Department of Revenue, Division of Motor Vehicles, to:

Last Name (Please print)	First Name

Check if to self

Pursuant to the Driver's Privacy Protection Act (18 USC 2721) and Colorado law (§ 24-72-204, § 42-1-206 (1)(b)(I)).

### Driver

Driver Date of Birth	Driver License Number	
Signature	Date (MM/DD/YY)	
Signature of Parent or Guardian if Driver is a Minor	Date (MM/DD/YY)	

### Person Receiving Record

Release Records to: Last Name	First Name	
Goetz	Erika	
Driver License Number	State	
	СО	
Company (if applicable)		
Estes Valley Fire Protection District		
Mailing Street Address		
901 N Saint Vrain Ave		
City		State ZIP Code
Estes Park		CO 80517
Email Address		Phone Number
egoetz@estesvalleyfire.org		970-577-3681

If your check is returned for insufficient funds or a closed account, you may not be issued or renew any type of driver license or identification card until the original check is redeemed and an administrative and short check fee are paid.

Under penalty of perjury, I attest that I shall not obtain, resell, transfer, or use the information in any manner prohibited by law. I understand that motor vehicle or driver records that are obtained, resold, or transferred for purposes prohibited by law may subject me to civil or criminal penalties under federal and state law. All of the information provided is true and accurate to the best of my knowledge.

Signature of Requestor	Date (MM/DD/YY)