



*Return applications to:*

**Chief David Wolting  
Goshen Fire District  
85880 First Street  
Eugene, Oregon 97405  
Phone: (541) 747-3104**

***The Goshen Fire District does not accept faxed  
or e-mailed applications.***

## **GOSHEN FIRE DISTRICT EMPLOYMENT APPLICATION**

***An Equal Opportunity Employer***

Social Security Number	Job applied for
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### **CONTACT INFORMATION**

Name (Last, First, MI):
Mailing Address:
City, State, And Zip Code:
Home Telephone:
Work Telephone:
Message (If Different):
E-mail Address:

### **CERTIFICATION AND SIGNATURE**

I hereby certify that all statements made in this application are true, and I agree and understand that any written statement that is false, fraudulent, or misleading in this application or attached materials, or made in the course of any related employment process may cause forfeiture of employment.

- I certify that all statements contained herein are true and complete.
- I understand that I must prove that I am authorized to work in the United States if I am hired.
- I authorize the employing agency to verify the employment and education information provided on this employment application.
- I authorize my driving record to be checked if the position for which I am applying requires driving.
- I understand and agree to be subjected to a pre-employment drug screening and a criminal history background check, if applicable.

Signature (must be in ink):	Date:
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## WORK HISTORY

The information provided in this section will be used to determine if you meet the minimum qualifications as outlined in the job announcement. List ONLY the job(s) (paid, military, or volunteer) where you obtained the experience that qualifies you for the job. Clearly describe all of your duties, starting with your most recent job. Resumes will be accepted only if required on the job announcement and will not be accepted in place of a completed application. If you need additional space, attach a separate sheet and duplicate the same format used on this application.

<b>JOB NUMBER 1</b>	Job Title
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Name of Employer	Supervisor's Name	Supervisor's Title
Employer's Address	City	ST
Employment Dates: From	To	Avg Hrs Worked/ Wk

**DUTIES:**


**SUPERVISION/LEAD WORK (CHECK THE AREAS YOU WERE RESPONSIBLE FOR):**

<input type="checkbox"/> Assigning and Reviewing Work	<input type="checkbox"/> Handling Disciplinary Problems	<input type="checkbox"/> Hiring or Recommending Hiring
<input type="checkbox"/> Rating Work Performance	<input type="checkbox"/> Responding to Grievances	<input type="checkbox"/> Not Responsible for Any of These

LIST THE NUMBER OF EMPLOYEES YOU SUPERVISED AND THEIR JOB TITLES:	# Employees:

<b>JOB NUMBER 2</b>	Job Title
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Name of Employer	Supervisor's Name	Supervisor's Title
Employer's Address	City	ST
Employment Dates: From	To	Avg Hrs Worked/ Wk

**DUTIES:**


**SUPERVISION/LEAD WORK (CHECK THE AREAS YOU WERE RESPONSIBLE FOR):**

<input type="checkbox"/> Assigning and Reviewing Work	<input type="checkbox"/> Handling Disciplinary Problems	<input type="checkbox"/> Hiring or Recommending Hiring
<input type="checkbox"/> Rating Work Performance	<input type="checkbox"/> Responding to Grievances	<input type="checkbox"/> Not Responsible for Any of these

LIST THE NUMBER OF EMPLOYEES YOU SUPERVISED AND THEIR JOB TITLES:	# Employees:

<b>JOB NUMBER 3</b>	Job Title		
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Name of Employer	Supervisor's Name	Supervisor's Title
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Employer's Address	City	ST	Phone
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Employment Dates:	From	To	Avg Hrs Worked/ Wk
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DUTIES:


**SUPERVISION/LEAD WORK (CHECK THE AREAS YOU WERE RESPONSIBLE FOR):**

<input type="checkbox"/> Assigning and Reviewing Work	<input type="checkbox"/> Handling Disciplinary Problems	<input type="checkbox"/> Hiring or Recommending Hiring
<input type="checkbox"/> Rating Work Performance	<input type="checkbox"/> Responding to Grievances	<input type="checkbox"/> Not Responsible for Any of These

LIST THE NUMBER OF EMPLOYEES YOU SUPERVISED AND THEIR JOB TITLES:	# Employees:
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<b>JOB NUMBER 4</b>	Job Title		
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Name of Employer	Supervisor's Name	Supervisor's Title
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Employer's Address	City	ST	Phone
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Employment Dates:	From	To	Avg Hrs Worked/ Wk
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DUTIES:


**SUPERVISION/LEAD WORK (CHECK THE AREAS YOU WERE RESPONSIBLE FOR):**

<input type="checkbox"/> Assigning and Reviewing Work	<input type="checkbox"/> Handling Disciplinary Problems	<input type="checkbox"/> Hiring or Recommending Hiring
<input type="checkbox"/> Rating Work Performance	<input type="checkbox"/> Responding to Grievances	<input type="checkbox"/> Not Responsible for Any of these

LIST THE NUMBER OF EMPLOYEES YOU SUPERVISED AND THEIR JOB TITLES:	# Employees:
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