Maynard Fire Department Application for Employment
Permanent Firefighter/EMT-Basic

Application Checklist Review Sheet

Candidates: Please use the checklist below to ensure your application is complete and that you have provided all necessary documentation to demonstrate your qualifications for the position. **Important:** Incomplete applications will not be scored or considered for further steps in the hiring process. **Be sure to complete, sign, and return this checklist along with your application.**

- ☐ All application-requested forms are legible and completed in blue or black ink
- ☐ I have attached a copy of my current valid EMT-B **(this is a mandatory certification I must have to apply)** If not attached, my application will not be considered. If I have taken the exam or have a scheduled date, I will inform the Chief via email.
- ☐ My email address has been provided
- ☐ The signed Background check form is attached
- ☐ I have attached my current resume
- ☐ I have attached a cover letter for the Maynard Fire Department
- ☐ I have attached any PRO-Board certifications I have for application scoring (FF I/II is preferred, not required) if none are submitted I understand that points given in the application review will not be awarded to this application. If I have completed the PRO-Board exam has a scheduled test date, I will inform the Chief via email.
- ☐ If I am currently a career firefighter or have career recruit training, I have attached documentation, and it is reflected on my resume
- ☐ The signed CORI check is completed and attached
- ☐ If you have a CDL a copy is attached
- ☐ If you are a current Maynard Resident, proof is attached
- ☐ I understand that a failure to answer any and all questions truthfully, accurately, or completely, shall result in the applicant's disqualification or if discovered after an individual is hired, a possible termination of employment.
- ☐ I understand applications are **not** accepted via email, and must be received by mail or in person by the deadline of July 20th at 4:00 p.m.
- ☐ **I understand that I am applying for a public safety position that demands public trust and personal responsibility. I have followed instructions specifically as directed. I agree all dates and information are accurate.**

Candidate: _____
Date_____

Chief Signature _____ *application received date*
_____

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Application

To The Applicant: READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTIONS. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, national origin, or disability. Federal Law also prohibits discrimination based on age with respect to certain individuals. The Laws of Massachusetts also prohibit some or all of the above–stated discrimination as well as some additional types, such as discrimination based on ancestry and marital status.

Name:
_____
_____

Address:
_____
_____

Town_____State_____Zip_
_____

Conditions of employment require residence within 100 miles of Maynard. If you are not within range, are you planning to relocate? ☐ YES
☐ NO

Phone Number I prefer contact:
_____

Preferred Email:
_____

Are you lawfully eligible for employment in the United States? ☐ YES
☐ NO

If you are under the age of 18 or over the age of 65 please state your age.
_____

Have you ever used another name? ☐ YES
☐ NO

If yes, name used
_____

Do you have a relative in the Maynard Fire Department? ☐ YES
☐ NO

If yes, please provide name and relationship:

_____

Do you know any firefighters working in the Maynard Fire Department? ☐ YES
☐ NO

If yes, name:

_____

Do you have a valid driver's license from the Commonwealth of Massachusetts? And or CDL? If yes, I have attached a copy of my current licenses. ☐ YES
☐ NO

Was your driver's license in this state or any other state ever suspended or revoked? If, yes please give details (may use additional paper) ☐ YES
☐ NO

Have you previously applied for employment with this municipality? If yes, when and for what position? ☐ YES
☐ NO

Year_____Department_____
_____

Education

Please list the schools you attended, your degree discipline, and the dates of graduation in your attached resume. Any specialized training in the fire service or EMS specifically should be reflected in your resume.

I have provided a complete list of my education on my resume. ☐ YES
☐ NO

Were you ever dismissed from a school or were involved in any disciplinary action including scholastic probation? ☐ YES
☐ NO

List awards, honors, citations positions held in school organizations, athletic endeavors, and other special recognition you received while attending school. List any special recognition you have received in your community since you left school. *(Exclude those organizations and awards which by their nature, name, or character indicate the religion, race, or national origin of its members).*

_____
_____
_____
_____

List any special abilities, interests, sports, or hobbies that are not included in your resume.

_____
_____
_____
_____

Do you speak any other languages other than English? ☐ YES
☐ NO

If yes please indicate the language & proficiency (indicate good, fluent, understand, read, write)

_____
_____
_____
_____

Do you currently have any court judgments pending against you? If yes, please attach an explanation of a separate page. ☐ YES
☐ NO

Employment History

Please include employment history on your attached resume

I have provided a thorough employment history on my resume. ☐ YES
☐ NO

I have documented my current and past employment/experience and training, particularly in EMS and the fire service, on my resume. ☐ YES
☐ NO

Have you ever been fired or forced to resign because of misconduct or unsatisfactory employment? If yes, please provide details on a separate page. ☐ YES ☐ NO

Military Service

Have you ever served active duty in the armed forces in the United States? ☐ YES
☐ NO

If yes: Branch _____ Dates of Service
_____

Type of Discharge _____ Date of Discharge _____

Are you now, or were you formerly in the National Guard or another reserve branch of the Armed Services? [ ] Present [ ] Former [ ] Never

References

List three References (not relatives). References should be former or present employers, fellow employees, schoolteachers, and responsible adults, who have a reputable standing in their community and have known you for at least five (5) years. All persons to whom you refer may be asked to appraise your character, ability and experience, personality, and other qualities.

1. Name
   _____
   Contact phone number
   _____
   Relationship
   _____

2. Name
   _____
   Contact phone number
   _____
   Relationship
   _____

3. Name
   _____
   Contact phone number
   _____
   Relationship
   _____

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW INDICATING THAT YOU UNDERSTAND AND AGREE TO THE TERMS AS STATED.

I understand that a physical examination, which may include a drug screening (urinalysis), may be required after an employment offer is made. I acknowledge that this application does not constitute a contract of employment and that either I or the Town of

Maynard may terminate the employment relationship at any time, with or without cause, and for any reason, subject to applicable laws. Any statements made by a Town representative, whether oral or written, contrary to this understanding are disavowed and may not be relied upon by any prospective or current employee.

I also understand that the Maynard Fire Department requires employees to adhere to a set schedule and be available as necessary. I further understand that any offer of employment is contingent upon the results of a complete background check, including a character and fitness investigation. I am aware that any willful omission or false statement on this application may lead to disqualification from the hiring process or dismissal from employment with the Department.

By signing this document, I certify that all statements made in this application are true and complete to the best of my knowledge. I authorize the Maynard Fire Department to contact any individuals or organizations necessary for the character and fitness investigation, including requesting a credit report if relevant to the position. I also consent to the disclosure of any information related to my background and qualifications by any person or entity contacted as part of the investigation.

I hereby release and discharge the Town of Maynard, its agents, representatives, and any individuals providing information, from all liability arising from the furnishing, receipt, or review of such documents, records, or information as part of this investigation.

This authorization shall remain in effect unless revoked in writing by me.

Name of Applicant
_____

Signature _____ Date
_____