



Application for Employment

BRIGHTON AREA FIRE AUTHORITY

615 W. Grand River Ave., Brighton, MI 48116

Ph: 810-229-6640 Fax: 810-229-1619

www.brightonareafire.com

Applicants for all positions are considered without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Position(s) applied for: _____ Date of Application: _____

How did you hear about us?

☐ Advertisement ☐ Friend ☐ Relative ☐ Website ☐ Walk-in ☐ Other _____
Please describe

☐ Referral by current member (provide name of individual) _____

Last Name _____ First Name _____ Middle _____

Address _____ City _____ State _____ Zip _____

E-mail address _____ Phone # _____

Have you ever filed an application with us before? ☐ Yes ☐ No (If yes, give approximate date) _____

Have you ever been employed with us before? ☐ Yes ☐ No (If yes, give dates) _____

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

Are you 18 years of age or older? ☐ Yes ☐ No

Can you provide proof of eligibility for employment in the United States? ☐ Yes ☐ No

What date would you be available to start? _____

Do you have a valid Driver's License? ☐ Yes ☐ No

Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☐ No

"The Brighton Area Fire Authority will consider the date and nature of conviction when making a hiring decision."

If you answered **yes** to the above question, please provide dates, places and disposition of conviction:

Have you ever been fired or asked to resign from a job? ☐ Yes ☐ No

If yes, please explain:

EDUCATION				
	Name & Location of School	Number of Years Completed	Course of Study	Diploma/Degree Earned
High School				
College/ University				
Vocational/Trade Graduate School				

AWARDS/HONORS
 List any awards or honors earned while in school.

Describe any specialized training, apprenticeship, skills, certifications and/or extra-curricular activities that you feel may be beneficial to this department or help qualify you for the position applied for.

REFERENCES <i>(Do not include relatives)</i>				
Name	Address	Phone No.	Business	Years known

EMPLOYMENT EXPERIENCE *(Start with your present or last job.)*

1.

Employer	Dates		Work Performed	
	From	To		
Address				
Job Title	Hourly Rate / Salary			
	Starting	Final		
Supervisor				
Reason for leaving				

2.

Employer	Dates		Work Performed	
	From	To		
Address				
Job Title	Hourly Rate / Salary			
	Starting	Final		
Supervisor				
Reason for leaving				

3.

Employer	Dates		Work Performed	
	From	To		
Address				
Job Title	Hourly Rate / Salary			
	Starting	Final		
Supervisor				
Reason for leaving				

4.

Employer	Dates		Work Performed	
	From	To		
Address				
Job Title	Hourly Rate / Salary			
	Starting	Final		
Supervisor				
Reason for leaving				

APPLICANT'S STATEMENT

**PLEASE READ THIS INFORMATION CAREFULLY AND INSURE THAT YOU
UNDERSTAND IT IN ITS ENTIRETY PRIOR TO SIGNING BELOW!**

I certify that the answers and information given by me in this application are true, correct and complete without qualification. I understand that the Brighton Area Fire Authority has the right to refuse to hire or immediately discharge me, at any time, should they discover that I have provided incomplete, untrue or misleading answers or information in this application or on any other documents or forms submitted at any time during my employment.

I understand that this application for employment shall be considered active for a period of time not to exceed twelve (12) months from the date signed below. Should I wish to be considered for employment by the Brighton Area Fire Authority beyond that time frame, I will then need to inquire as to whether or not applications are being accepted at that time.

I hereby authorize the Brighton Area Fire Authority to verify the answers and information given by me in this application and to make any investigation of my background deemed necessary. I authorize former employers, law enforcement organizations, educational institutions and any other third party contacted by the Brighton Area Fire Authority to release to them any information they have regarding me without providing written notice to me.

I authorize the Brighton Area Fire Authority to use any information in its possession concerning me for any purpose it deems appropriate, including disclosure of information to any third party, future employer or prospective future employer without notification to me of such disclosure and I release the Brighton Area Fire Authority from any liability in connection with such use or disclosure.

State and federal laws require the Brighton Area Fire Authority to make reasonable accommodations to disabled applicants where the accommodation does not impose undue hardship on the Fire Authority. If you require accommodation during the application or hiring process, contact the Human Resources Director at 810-229-6640.

If I am hired by the Brighton Area Fire Authority, I understand that I have the right to terminate my employment at any time and for any reason, with or without cause. I further understand that the Brighton Area Fire Authority may terminate my employment with them at any time, with or without cause and with or without notice. This employment relationship **(at will)** exists regardless of any other written statements, policies or documents of the Brighton Area Fire Authority or any verbal statement to the contrary.

I agree and understand that any employment offer is **conditional** upon the results of a post-offer medical examination which may include psychological, drug and alcohol tests.

I agree not to commence any action or claim relating to my employment with the Brighton Area Fire Authority or this application for employment more than six (6) months after termination of such employment, or the date of this application, and to waive any statute of limitations to the contrary.

Signature of Applicant

Date