

Dunn Emergency Services, Inc.
 PO Box 203
 Dunn, North Carolina 28335
 Office: (910) 892-1211
 Fax: (910) 892-7777

**APPLICATION FOR
 VOLUNTEER/EMPLOYMENT**

DATE _____ / _____ / _____

AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL

Name:		Age:	Date of Birth:	
Street		Social Security:		
City:		Home Phone:		
State:	Zip:	Business Phone:		
Driver's License#:		E-Mail Address:		
Position Applying For: Vol. EMS _____ Vol. Fire _____ Vol EMS/Fire _____ Paid Position _____				

EDUCATION

Name and Location	From	To	Degree/Major	Date Graduated
High School:				
College:				
Other:				
Other:				

SPECIAL TRAINING AND CERTIFICATIONS (Applicable to Employment)

EMPLOYMENT HISTORY(Start with Most Recent)

Employer:	From:	To:	Phone:
Job Title:	Describe Job Duties:		
Supervisor			
Starting Salary			
Ending Salary	Reason for Leaving:		
May we Contact The Above Employer:		YES: <input type="radio"/>	No: <input type="radio"/>

Employer:	From:	To:	Phone:
Job Title:	Describe Job Duties:		
Supervisor			
Starting Salary			
Ending Salary	Reason for Leaving:		
May we Contact The Above Employer:		YES: <input type="radio"/>	No: <input type="radio"/>

Employer:	From:	To:	Phone:
Job Title:	Describe Job Duties:		
Supervisor			
Starting Salary			
Ending Salary	Reason for Leaving:		
May we Contact The Above Employer:		YES: <input type="radio"/>	No: <input type="radio"/>

MILITARY SERVICE

Branch	From:	To:
Rank	Type of Discharge:	
Duties:		

REFERENCES

NAME AND ADDRESS	OCCUPATION		PHONE NUMBER

*****ALL APPLICANTS MUST FURNISH A COPY OF THEIR DRIVING RECORD AND A COPY THEIR CRIMINAL HISTORY PRIOR TO BEING INTERVIEWED*****

Applicant may attach a copy of their resume and/or certifications if they wish, however this application must be completed and signed prior to being considered for any position with the department.

APPLICANT: Read and Sign Below

The information provided by me in this application for employment is true, complete and accurate to the best of my knowledge. I understand that if I am employed or accepted as a volunteer any false statement will be considered as cause for dismissal.

APPLICANT SIGNATURE: _____ DATE: _____

Completed application **MUST** have attached a copy of your current driving record and criminal history. If you have lived at your current address for less than 6 months you must provide a criminal history from the previous county.