

**Allendale Charter Township Fire Department**  
**Application for Employment**  
**(Pre-employment Questionnaire)**

**Personal Information**

Name \_\_\_\_\_

Please provide any special information we may need about your name or use of another name for us to be able to check your work record and otherwise verify the information given in this application: \_\_\_\_\_  
\_\_\_\_\_

Present Address \_\_\_\_\_

Telephone \_\_\_\_\_ E-Mail \_\_\_\_\_

Fax number \_\_\_\_\_

Social Security Number \_\_\_\_\_

Are you 18 years old or older? \_\_\_\_\_ If under 18, please state your age \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_\_ If hired, can you provide the documents required to prove that you are legally able to work in the United States? \_\_\_\_\_

Have you ever been convicted of a crime or are there any felony charges pending against you? \_\_\_\_\_ (A yes response does not automatically disqualify a job applicant from further consideration. Each situation is evaluated relative to the job being sought. Factors such as the age and nature of the offense, and rehabilitation will be taken into account.) If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Drivers License Number \_\_\_\_\_

In case of emergency, notify \_\_\_\_\_

Telephone \_\_\_\_\_

Have you served in the United States Armed Forces? \_\_\_\_\_

Branch of Service \_\_\_\_\_ Rank at discharge \_\_\_\_\_

Date of Discharge \_\_\_\_\_

Describe your duties and any special training:

\_\_\_\_\_

**Please provide copies of all required certification certificates with application**

**Employment Information**

Position desired: **Full time Firefighter / EMT / Inspector**

Salary desired \_\_\_\_\_ Date you could start \_\_\_\_\_

Have you filed an application here before? \_\_\_\_\_

If so, when? \_\_\_\_\_

Have you ever been employed here before? \_\_\_\_\_

If so, when? \_\_\_\_\_

Are any relatives current or former employees? \_\_\_\_\_

Are you available full-time \_\_\_\_\_ part-time \_\_\_\_\_

Are you employed now? \_\_\_\_\_

If so, may we contact your present employer? \_\_\_\_\_

Are you on a lay-off and subject to recall? \_\_\_\_\_

What special work experiences have you had?

\_\_\_\_\_  
\_\_\_\_\_

Can you perform all of the job functions of the position for which you are applying without reasonable accommodations? \_\_\_\_\_ (A no response does not automatically disqualify a job applicant from further consideration. A determination will be made as to the effectiveness with which the accommodation will allow you to perform the essential functions of the position and the hardship it would impose on the Township.) Please describe the accommodation you believe is needed, if any: \_\_\_\_\_

**Education**

	Name/location of school	Major subject(s) studied	Number of years	Did you graduate?
High School				
College				
Technical Training				

Subjects of special study or research \_\_\_\_\_

**Employment History**

Start with present employment and work back.

Date (month/year)	Employer name and address	Supervisor's name	Position	Salary (start/ending)
from to				
Reason for leaving				
from to				
Reason for leaving				
from to				
Reason for leaving				
from to				
Reason for leaving				
from to				
Reason for leaving				

May we contact the employers listed above? \_\_\_\_\_ If not, indicate the one(s) you do not wish to have us contact \_\_\_\_\_

Summarize special skills and qualifications acquired from employment or other experience:  
\_\_\_\_\_

**References**

Give the names of three people, not related to you, whom you have known at least one year.

Name	Address and telephone	Employer and/or title	Years acquainted

**Authorization and Understanding**

I certify that information given in this application and related documentation is true and complete without qualification. I understand the Allendale Charter Township may investigate my work and personal history and verify all data given on this application, on related papers, and in interviews, and I authorize the Township to do the same.

This inquiry may include information as to my character, general reputation and personal characteristics, and I consent to the conduct of this inquiry and to the consideration of any statements of references of former employers that are given in response to the inquiry. I authorize all individuals, schools and employers named, except as specifically limited on this application, to provide information requested about me, and I release them from liability for damages in providing this information. I understand and acknowledge that the Township is entitled to rely on the representations made by me in the hiring process, and therefore, I understand and acknowledge that any misrepresentation or omission of fact by me can result in immediate discharge, if deemed appropriate by the Township.

I also understand and acknowledge that, if hired, my employment and compensation will be at the will of the Township and can be terminated, with or without cause, and with or without notice, at any time at the option of either the Township or myself. I further understand and agree that no manager, representative, agent or employee of the Township, other than it's Supervisor, has now or has had in the past any authority to enter into any agreement for employment for any specified relationship, and that any such agreement or representation must be in writing and signed by both myself and the Supervisor of the Township in order to be effective.

Furthermore, I agree that if I become employed by the Township, then in consideration for my employment, I will not commence any action, including any administrative claim or suit, against the Township or its agents more than 180 calendar days after the date of the event giving rise to said action(s), including, but not limited to, any action of my employment, and I hereby waive any statute of limitations to the contrary.

I further understand and acknowledge that, as a part of the hiring process and throughout my employment, if hired, I may be required to submit to medical/physical examinations (which may include tests for communicable diseases, drugs and/or alcohol) at the Township's discretion and expense.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

*This application will only be considered for the ninety calendar day period after it's receipt by the Township. Should you wish to be considered after the expiration of this period, you must re-apply.*

*Allendale Charter Township is an equal opportunity employer and complies with all laws prohibiting discrimination on the basis or race, color, age, sex, national origin, religion, citizenship, handicap, height, weight and marital status. Under the Michigan Handicappers Civil Rights Act and the federal Americans With Disability Act, the Township has a legal obligation to accommodate an employee's or job applicant's handicap unless the accommodation would impose an undue hardship on the Township. A handicapper may allege a violation against the Township regarding a failure to accommodate his or her handicap under the Michigan law only if the handicapper notifies the Township in writing of the need for accommodation within 182 days after the date the handicapper knew or reasonably should have known that an accommodation was needed.*

**Allendale Charter Township**  
**Notice of Compliance with the Americans with**  
**Disabilities Act**

Allendale Charter Township does not discriminate on the basis of disability in admission to, access to, or operations of its programs, services or activities. Allendale Charter Township does not discriminate on the basis of disability in its hiring or employment practices.

This notice is provided as required by Title II of the Americans with Disabilities Act (ADA) of 1990.

Questions, concerns, complaints, or requests for additional information regarding the ADA may be forwarded to Allendale Charter Township's designated ADA Coordinator:

Candy Kraker, Township Clerk  
6676 Lake Michigan Drive, Allendale MI 49401  
Phone Number: 616-895-6295  
Email: candy@allendale-twp.org  
Days/Hours Available: Normal Business Hours

Individuals who need auxiliary aids for effective communication in programs and services of Allendale Charter Township are invited to make their needs and preferences known to the ADA Coordinator.

**Selection Guidelines for Full Time Firefighter:**

Formal Application, Background Check, Driving Record Review, Written Examination, Oral Interview by Panel, Oral Interview by Officers, Final Interview by Fire Chief, Conditional Offer of Employment, Medical Examination, Drug Screen, Final Selection, Twp. Board Approval

I have read and understand the above guidelines for selection of Full Time Firefighter.

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(Signature)

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(Date)