



**Lakeside Fire Protection District**  
 12216 Lakeside Ave  
 Lakeside, CA 92040  
 619-390-2350  
 www.Lakesidefire.org

## Employment Application

**INSTRUCTIONS (please read carefully):** This application is an initial part of the candidate evaluation process. Please apply only if you feel reasonably certain that you meet the requirements as described in the position flyer. Completely fill out this application by typing or printing clearly. Attach additional sheets as necessary, identifying each with your name. Incomplete applications will NOT be accepted. Please notify us promptly if you have a change of address, phone or employer. Applications will be accepted: In person at Fire Administration Monday – Thursday 8 am – 4 pm or email: [Recruitment@lakesidefire.org](mailto:Recruitment@lakesidefire.org)

<b>Position(s) you are Applying for:</b>					
<b>Full Name (Last, First MI)</b>					
<b>Home Address</b>			<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Mailing Address (if different from home address)</b>			<b>E-mail Address</b>		
<b>Home Phone Number</b>	<b>Cell Phone Number</b>	<b>Driver's License Number</b>	<b>State</b>	<b>Exp. Date</b>	

### EDUCATION AND TRAINING

Name and location of High School: \_\_\_\_\_

Did you receive a high school diploma?

Yes  No  GED

**Include relevant education and training, including college, business, technical and in-service coursework. Copies of the following must be submitted with signed application: California Driver's License, and Professional Education Degree and Certificates.**

School Name Location (city and state)	Units/Hours Completed		Course/Series Title or Major Field	Degree/Certificate Received & Year
	Sem.	Qtr.		

**Additional Professional/Technical Licenses and/or Certificates and year acquired:**

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**How were you referred to our District?**

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### EXPERIENCE

Beginning with your current or most recent position, list all positions you have held for at least the last 10 years; that are relevant to the position in which you are applying. Each title change, or promotion should be listed and detailed separately. If additional space is needed, please make copies of this page.

	<b>Employer:</b>	
	<b>Address:</b>	
<b>Total Yrs:</b>	<b>Mos:</b>	<b>Job Title/Assignment:</b>
<b>Hours/Week:</b>	<b>Duties</b>	
<b>Supervisor:</b>	<b>Title:</b>	<b>Phone:</b>
<b>Reason for leaving:</b>		
	<b>Employer:</b>	
	<b>Address:</b>	
<b>Total Yrs:</b>	<b>Mos:</b>	<b>Job Title/Assignment:</b>
<b>Hours/Week:</b>	<b>Duties</b>	
<b>Supervisor:</b>	<b>Title:</b>	<b>Phone:</b>
<b>Reason for leaving:</b>		
	<b>Employer:</b>	
	<b>Address:</b>	
<b>Total Yrs:</b>	<b>Mos:</b>	<b>Job Title/Assignment:</b>
<b>Hours/Week:</b>	<b>Duties</b>	
<b>Supervisor:</b>	<b>Title:</b>	<b>Phone:</b>
<b>Reason for leaving:</b>		
	<b>Employer:</b>	
	<b>Address:</b>	
<b>Total Yrs:</b>	<b>Mos:</b>	<b>Job Title/Assignment:</b>
<b>Hours/Week:</b>	<b>Duties</b>	
<b>Supervisor:</b>	<b>Title:</b>	<b>Phone:</b>
<b>Reason for leaving:</b>		

Additional pages of this application form attached?

Yes  No

**CERTIFICATE OF APPLICANT (Read carefully before signing):** I hereby certify that all statements made in this application and on all supplemental information provided are true, and I agree and understand that any misstatement of facts may cause disqualification from or forfeiture of employment. I authorize the Lakeside Fire District to make any necessary and appropriate investigations to verify the information provided.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_