



City of Waco Fire Department Preliminary Fire Fighter Application

INSTRUCTIONS: Answer each question clearly and completely. **If questions are not applicable, enter "NA". Do not leave questions blank.** Be sure to sign when completed. Incomplete applications will not be considered. If more space is required for any question, please attach additional sheets as necessary. Resumes will not be accepted in lieu of an application; you may attach a resume to this completed application. This application will only be considered for the position applied for. To be considered for other positions you will need to complete an additional application per position. The City of Waco is an Equal Opportunity Employer and all applicants will receive consideration without regard to race, color, religion, national origin, gender, sexual orientation and/or gender identity, age, and veteran or disability status.

Date: _____/_____/_____

Last Name: _____ First Name: _____ Middle/Maiden: _____

Current Residence Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address if Different: _____

Residence Telephone Number: (____) ____-____ Cell Phone Number: (____) ____-____

Date of Birth: ____/____/____
month / day / year

Eligibility:

Are you at least eighteen (18) years and not have attained the age of thirty-six (36) on the date of the written examination, October 8, 2016? Yes ____ No ____

Are you a citizen of the United States of America? Yes ____ No ____

Are you a graduate from an accredited high school or have a GED and twelve (12) semester hours of credit from an accredited college or university? Yes ____ No ____

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

If you have answered No to any of the Eligibility questions you are **not** eligible to apply for the written examination.

Have you ever been convicted of a felony? Yes ____ No ____

If you answered Yes you are not eligible to apply for the written examination.

List the number of traffic violations/ tickets you have received in the last 3 years? _____

List the number of traffic accidents you have received in the past 3 years? _____

Have you received any DWI or DUI in the past 3 years? _____

Have you used illegal drugs (such as marijuana) in the last 2 years? _____

Have you used prescription drugs that where not prescribed to you in the last 2 years? _____ If so, what? _____



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Military

Have you served in the Armed Forces of the United States for at least one year and can provide proof showing an honorable discharge (DD-214)? Yes ____ No ____

If you checked yes, you will need to bring your DD-214 when you check in on the day of the written examination to receive your 5 points. Documentation will not be accepted after the check-in date and time.

Criminal History

Are you currently on probation, deferred adjudication, or parole? Yes ____ No ____

Have you ever been convicted, placed on deferred adjudication or community supervision, or pleaded guilty or no contest to a felony offense? Yes ____ No ____



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I hereby certify to the best of my knowledge and belief that there are no willful misrepresentations, omissions, or falsifications on this application. In order for the City of Waco to be fully informed as to my personal character and qualifications for employment, I refer to each of my former employers and to any other person who may have information concerning me.

As this information is furnished at my express request and for my benefit, I do hereby release officials of the City of Waco from any and all liability for any damage of whatsoever nature on account of furnishing such information.

I also acknowledge that any misrepresentations, falsifications, or inaccuracies made in answering the questions in this application is good cause for removal from the eligibility list or discharge during or after a period of probation.

Print Name: _____

Signature of Applicant: _____