



# CLARK COUNTY FIRE DEPARTMENT RURAL DIVISION

Resident (Rural)

Non-Resident (live in Las Vegas Valley)

Position(s) applying for:

Support

EMS

Firefighter

Wildland

**Please answer the following questions:**

Are you at least 18 years of age?

**YES**

**NO**

Do you have a High School Diploma or equivalent?

Can you submit proof of your legal right to work in the US?

Have you been convicted of a felony?

Do you have Veteran's preference?

**Please complete the following required information:**

Last Name \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Birth Date \_\_\_\_\_ Last four of SSN \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Notification Person: \_\_\_\_\_

Emergency Notification Phone: \_\_\_\_\_

EMT Status: None  Basic  Advanced  Paramedic

SNHD EMS # \_\_\_\_\_ Expiration date \_\_\_\_\_

CPR expiration date: \_\_\_\_\_

State/IFSA Firefighter certifications None  HazMat  Firefighter 1  Firefighter 2

**Driver License Information**

LICENSE NUMBER	ISSUE DATE	EXPIRATION DATE	STATE	CLASS	ENDORSEMENTS	RESTRICTIONS

**Acceptance as a Volunteer Firefighter is contingent upon the background investigation and physical examination.**

Copies of EMS/CPR and Firefighter certifications **MUST** accompany this application. Please forward your completed application and certifications to [RuralCCFD@clarkcountynv.gov](mailto:RuralCCFD@clarkcountynv.gov).





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**EXPERIENCE:** STARTING WITH YOUR MOST RECENT JOB, LIST ALL YOUR WORK/VOLUNTEER EXPERIENCE THAT QUALIFIES YOU FOR THE JOB YOU ARE APPLYING FOR. **DO NOT SUBSTITUTE A RESUME OR WRITE "SEE ATTACHED RESUME" FOR THIS APPLICATION, AS INFORMATION ON YOUR RESUME WILL NOT BE CONSIDERED.**

## EMPLOYMENT HISTORY

**MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO**

**1. COMPANY/AGENCY NAME:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ HOURS WORKED PER WEEK \_\_\_\_\_

POSITION/TITLE: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

START DATE :( MO/YR) \_\_\_\_\_ END DATE: (MO/YR) \_\_\_\_\_

DUTIES:

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REASON FOR LEAVING: \_\_\_\_\_

**2. COMPANY/AGENCY NAME:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ HOURS WORKED PER WEEK \_\_\_\_\_

POSITION/TITLE: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

START DATE :( MO/YR) \_\_\_\_\_ END DATE: (MO/YR) \_\_\_\_\_

DUTIES:

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REASON FOR LEAVING: \_\_\_\_\_



## CLARK COUNTY FIRE DEPARTMENT RURAL DIVISION

3. COMPANY/AGENCY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ HOURS WORKED PER WEEK \_\_\_\_\_

POSITION/TITLE: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

START DATE :( MO/YR) \_\_\_\_\_ END DATE: (MO/YR) \_\_\_\_\_

DUTIES:

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REASON FOR LEAVING: \_\_\_\_\_

4. COMPANY/AGENCY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ HOURS WORKED PER WEEK \_\_\_\_\_

POSITION/TITLE: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

START DATE :( MO/YR) \_\_\_\_\_ END DATE: (MO/YR) \_\_\_\_\_

DUTIES:

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REASON FOR LEAVING: \_\_\_\_\_

**NOTE: ANY MODIFICATION OR RE-CREATION OF THIS OFFICIAL APPLICATION OR SUPPLEMENTAL WILL RESULT IN THE APPLICATION BEING REJECTED.**



## CLARK COUNTY FIRE DEPARTMENT RURAL DIVISION

List all criminal convictions that you have on your record, that are higher than a moving violation. Please include the state, date, and disposition of each conviction.

BY SUBMITTING THIS APPLICATION, I VERIFY ALL STATEMENTS MADE ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT:

1) ANY FALSE STATEMENTS OR INCOMPLETE INFORMATION WILL BE CAUSE FOR REJECTION OF MY APPLICATION MATERIALS OR DISCHARGE FROM EMPLOYMENT.

2) I UNDERSTAND THAT PRIOR TO EMPLOYMENT, I MUST SHOW PROOF OF CITIZENSHIP OR LEGAL RIGHT TO WORK IN THE UNITED STATES. I UNDERSTAND AS INDICATED ON THE ONLINE EMPLOYMENT APPLICATION I MUST LIST ALL CRIMINAL CONVICTIONS THAT I HAVE ON MY RECORD, THAT ARE HIGHER THAN A MOVING VIOLATION. I MUST INCLUDE STATE, DATE, AND DISPOSITION OF EACH CONVICTION. I FURTHER UNDERSTAND THAT A CONVICTION DOES NOT AUTOMATICALLY BAR ME FROM EMPLOYMENT. I UNDERSTAND THAT EMPLOYMENT IS CONTINGENT UPON SUCCESSFUL COMPLETION OF A BACKGROUND INVESTIGATION. PERIODICALLY AFTER EMPLOYMENT BACKGROUND INVESTIGATIONS MAY BE CONDUCTED.

SUBMITTING THIS APPLICATION AUTHORIZES CLARK COUNTY TO CONDUCT ANY AND ALL NECESSARY BACKGROUND CHECKS RELATED TO THIS POSITION.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_