

# Osage Beach Fire Protection District

*“Our Family, Protecting Your Family, Because We Care”*

TO: Prospective Applicants

Thank you for your interest in the Osage Beach Fire Protection District. We at Osage Beach pride ourselves on the delivery of state of the art emergency services in the area of fire, rescue, EMS and hazardous materials mitigation. We have a long and proud history of serving our community, whatever the need is.

Please complete and sign the attached cover letter and application and return to:

Osage Beach Fire Protection District  
1170 Bluff Dr  
Osage Beach, MO 65065

Some positions within the Fire Department may require a criminal background check and pre-employment drug and alcohol screening. By completing and signing this cover letter and application, you are signifying that you are aware of this requirement for employment with the District.

Any falsification or willful omission of fact made in this application or in connection with any background investigation may be sufficient grounds for rejection of said application, or, if discovered after an offer of employment, immediate dismissal.

The Osage Beach Fire Protection District is an equal opportunity employer.

Sincerely,

Paul Berardi  
Fire Chief  
Osage Beach Fire Protection District

Applicant Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

1170 Bluff Drive • Osage Beach, Missouri 65065  
Business (573) 348-1221 • FAX (573) 348-4742

## ***Osage Beach Fire Protection District Application for Employment***

*The Osage Beach Fire Protection District is an Equal Opportunity Employer and are dedicated to a policy of non-discrimination in employment.*

Application for: Volunteer: \_\_\_\_\_ Paid: \_\_\_\_\_

Date: \_\_\_\_\_

### **I-PERSONAL INFORMATION**

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Telephone: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

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

Position Applied for: \_\_\_\_\_

Is there any information we would need about your name or use of another name to be able to check your work record? Please specify: \_\_\_\_\_

Do you have any relatives who are presently employed by the Osage Beach Fire Protection District? If so please specify: \_\_\_\_\_

How were you referred to the Osage Beach Fire Protection District? \_\_\_\_\_

Have you been convicted of a felony in the past 10 years? YES \_\_\_\_ NO \_\_\_\_ If answered yes, please explain: \_\_\_\_\_

Have you been convicted of a misdemeanor in the last 5 years? YES \_\_\_\_ NO \_\_\_\_ If answered yes, please explain: \_\_\_\_\_

### **II-EDUCATION HISTORY**

Elementary: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Years Completed: \_\_\_\_\_

Junior High: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Years Completed: \_\_\_\_\_

High School: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Years Completed: \_\_\_\_\_

College: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Years Completed: \_\_\_\_\_

Degree: \_\_\_\_\_

Other: (Please Describe) \_\_\_\_\_

**III-EMPLOYMENT HISTORY**

(list in order of most recent)

Company Name: \_\_\_\_\_ Postion Held: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone:( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Wage/Salary: \_\_\_\_\_ per \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_ Postion Held: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone:( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Wage/Salary: \_\_\_\_\_ per \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_ Postion Held: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone:( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Wage/Salary: \_\_\_\_\_ per \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

*NOTE: Use additional sheet to list additional employers if necessary.*

**IV-REFERENCES Please do not include former employers or relatives**

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_ Telephone:( ) \_\_\_\_\_

Occupation: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_ Telephone:( ) \_\_\_\_\_

Occupation: \_\_\_\_\_

Name: \_\_\_\_\_ Years Known: \_\_\_\_\_ Telephone:( ) \_\_\_\_\_

Occupation: \_\_\_\_\_

**V-WORK AVAILABILITY**

If your application recieves favorable consideration when will you be available to begin? \_\_\_\_\_

Many positions on the Fire Department require overtime with short notice, evenings and weekends. Overnight travel out of the area may also be required. Is there any reason you could not comply with these requirements? \_\_\_\_\_

**VI-SALARY/HOURLY RATE REQUIREMENTS**

If your application recieves favorable consideration, what salary/hourly rate would you require? \$ \_\_\_\_\_ per \_\_\_\_\_

Applicant Signature: \_\_\_\_\_