MID COUNTY
FIRE PROTECTION DISTRICT

1875 Pennsylvania Avenue
St. Louis, MO 63133
314-863-4018
midcountyfpd.org

APPLICATION FOR EMPLOYMENT

Applicant Information

Last Name: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Date of Birth: ___/___/___

Driver License #: _____ State: _____ Expires: ___/___/___

Paramedic License #: _____ Expiration Date: ___/___/___

Education / Certifications

High School/GED: _____ Graduation Date: ___/___/___

Paramedic School: _____ Graduation Date: ___/___/___

Greater St. Louis County Fire Academy Graduation Date: ___/___/___

College: _____ Graduation Date: ___/___/___

Degree: _____

List any current Missouri Division of Fire Safety Certifications above those required for the St. Louis County Fire Academy/ Firefighter I & II:

_____ _____

_____ _____

_____ _____

U.S. Military Service History

Branch: _____ Active or Reserve _____

Dates of Service: From ___/___/___ To ___/___/___

Type of Discharge: _____

Employment History

List your three most recent employers or employment for the last 10 years.

Employer 1: _____

Address:

Street _____ City: _____
State: _____ Zip: _____ Phone: _____

Employment Dates: From ____/____/____ To ____/____/____

Employer 2: _____

Address:

Street _____ City: _____
State: _____ Zip: _____ Phone: _____

Employment Dates: From ____/____/____ To ____/____/____

Employer 3: _____

Address:

Street _____ City: _____
State: _____ Zip: _____ Phone: _____

Employment Dates: From ____/____/____ To ____/____/____

Personal History

Do you have family in the fire service? Yes _____ No _____

Name: _____ Dept/Dist.: _____

Name: _____ Dept/Dist.: _____

Name: _____ Dept/Dist.: _____

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

If yes, explain on a separate sheet of paper.

Have you ever had an adverse action imposed against your driver or paramedic license? Yes _____ No _____

If yes, explain on a separate sheet of paper.

I certify that the information included with this application packet is true and correct to the best of my knowledge.

Applicant Signature: _____ Date: ____/____/____