

Employment History *(begin with most recent employer)*

From	To	Employer	Phone
Job Title		Address	
Supervisor		Job Summary	
May we contact for reference? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Later			
Reason for Leaving		Hourly Rate/Salary Start Per	Final Per

From	To	Employer	Phone
Job Title		Address	
Supervisor		Job Summary	
May we contact for reference? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Later			
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Skills and Qualifications - APCO Basic Telecommunicator Training Certification Required

Summarize any training, skills, licenses and/or certificates that may qualify you as being to perform job-related functions in the position for which you are applying.

Educational Background *(if job related)*

Name and Location	No of Years Completed	Did you graduate?		Course of Study
		Major	Degree	
High School				
College				
Other				

References

Name	Telephone	Number of Years Known

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, I am responsible for keeping my application current. Additionally, it may be necessary to reapply for employment.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that as a condition of employment, I will be required to submit to random drug testing.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant: _____

Date: _____