



App. Number _____

**BEECH GROVE FIRE DEPARTMENT
EMPLOYMENT APPLICATION
An Equal Opportunity Employer**

Revised 1/2021

DATE: _____

MERIT FIREFIGHTER CIVILIAN PARAMEDIC CIVILIAN EMT

BASIC MINIMUM REQUIREMENTS: If you do not meet these requirements, please do not apply.

- 1. AGE: (Merit Firefighter)** A person may not be appointed as a member of the fire department after the person has reached thirty-six (36) years of age (IC 36-8-4-7). YOU MUST BE 21 YEARS OLD TO BE A FIRE FIGHTER IN THE STATE OF INDIANA.
- 2. RESIDENCY REQUIREMENTS: (Merit Firefighter)** (a) Members of the fire department must reside in Indiana in one of the following areas:
 - (a) Within the county in which the city is located; or
 - (b) In a county that is contiguous to the county in which the city is located. (IC 36-8-4-2).
- 3. Education:** Must be a high school graduate.
- 4. No felony or serious misdemeanor arrest record.**
- 5. Must possess a valid Indiana driver's license.**
- 6. No use of illegal or illicit drugs.**
- 7. (Civilian Paramedic)** Applicants must have current Indiana Paramedic License or National Registry Certified or reciprocity.

Instructions: All applications *must be complete* and accompanied by a copy of your birth certificate and High School Diploma. Incomplete applications will not be considered. Also include copies of all other Diplomas and/or certificates of schools attended with grade and/or credit transcripts. Include military discharge papers and a copy of your driver's license.

If additional space is needed for any item, use additional space provided, or include additional sheets. Neatness of this application is evaluated. This application will be kept on file for one year; after one year it will become inactive and will be destroyed if not updated.

NAME Of
APPLICANT _____
(last) (first) (middle)

PERSONAL INFORMATION

FULL NAME _____
(last) (first) (middle)
PRESENT ADDRESS: _____ D.O.B.: _____
CITY: _____ S.S.# _____
STATE: _____ ZIP: _____ PHONE: HOME: _____ OTHER: _____
E-MAIL ADDRESS: _____

RELATIVES			
NAME	ADDRESS	RELATIONSHIP	

HIGH SCHOOL: _____ ADDRESS: _____
OTHER PRE-COLLEGE
INFO: _____
ARE YOU A HIGH SCHOOL GRAD?: _____ ATTENDED FROM/TO: _____
COLLEGE: _____ FROM/TO: _____ MAJOR: _____
DIPLOMA RECEIVED: _____ DATE GRADUATING: _____
ALL DIPLOMAS AND
TYPE OF DEGREE: _____ TRANSCRIPTS ATTACHED? _____
OTHER EDUCATION OR SPECIAL SKILLS: _____

MILITARY

MILITARY BRANCH: _____ HONORABLE DISCHARGE? YES NO LENGTH OF SERVICE: _____
DATES FROM / TO _____
DUTIES: _____
ARE YOU PRESENTLY A MEMBER OF THE GUARD OR RESERVE? YES NO

EMPLOYMENT	Include last 10 yrs
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START WITH PRESENT EMPLOYER, WORK BACKWARDS (For additional past employers use reverse side)

1. PRESENT

EMPLOYER: _____ PHONE: _____

ADDRESS: _____ DUTIES: _____

FROM: _____ TO: _____ SUPERVISOR: _____

YEARLY SALARY: _____ MAY WE CONTACT THIS EMPLOYER?: _____

REASON FOR LEAVING: _____

2. PAST

EMPLOYER: _____ PHONE: _____

ADDRESS: _____ DUTIES: _____

FROM: _____ TO: _____ SUPERVISOR: _____

YEARLY SALARY: _____ MAY WE CONTACT THIS EMPLOYER?: _____

REASON FOR LEAVING: _____

(For additional past employers use reverse side, or include additional sheets)

EXPERIENCE

AGENCY	CITY/COUNTY	POSITION	FROM/TO

LIST ANY SPECIAL SKILLS OR ABILITIES THAT PERTAIN TO THIS JOB APPLICATION:

COURT RECORD

HAVE YOU EVER BEEN CHARGED WITH VIOLATIONS? YES NO

IF YES LIST

ALL CHARGES: _____

(Include traffic).

Give disposition and details

HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED OR REVOKED? YES NO

PERSONAL REFERENCES:

LIST FOUR REFERENCES; PERSONS YOU HAVE KNOWN FOR LAST FIVE YEARS. (No relatives)

NAME	ADDRESS	PHONE

(BE SURE TO INCLUDE PHONE NUMBER)

CLUB AND ORGANIZATION MEMBERSHIPS

NAME	ADDRESS	OFFICE HELD	DATE

FIRE AND EMS CERTIFICATIONS

CERT NAME	EXP. DATE	CERT NAME	EXP. DATE

ADDITIONAL INFORMATION:

BEECH GROVE FIRE DEPARTMENT
WAIVER OF PRIVILEGE
APPLICATION FOR EMPLOYMENT

You are hereby authorized and requested to give to the city of Beech Grove, or to any of its authorized representatives, any information or reports concerning the applicant named below. Please allow said city, or its authorized representative, to examine and copy all records which anyone, civilian and/or military may have relating to said party's background, being it past, present or future.

Any person or entity, civilian and/or military, holding records of named applicant is also authorized to furnish, if requested, photostat or other copies of all said records to said city, or its authorized representative; or to release said records to said city for copying.

I, _____, HEREBY EXPRESSLY WAIVE ALL
applicant's name
 PRIVILEGE WHICH MIGHT OTHERWISE ATTACH TO SUCH COMMUNICATIONS OR DISCLOSURES.

applicant's signature

applicant's address

Applicant's checklist of required materials. Please do not submit original documents.
 Do not submit this application until complete.

1. ____ Birth Certificate
2. ____ High School Diploma
3. ____ College, University or Vocational Diploma & Certificates
4. ____ Copies of CPR, ACLS, PALS, PEPP, ITLS, or related
5. ____ Copies of any other EMS related credentials
6. ____ Military Discharge
7. ____ Driver's License
8. ____ Your (1) Signature
9. ____ Copy of Indiana EMT/Paramedic Certification

BEECH GROVE FIRE DEPARTMENT
 330 E. CHURCHMAN AVE.
 BEECH GROVE, INDIANA 46107
 AN EQUAL OPPORTUNITY EMPLOYER
 (317) 808-5605
www.beechgrove.com

Email Completed Application to james.pierce@beechgrove.com