

# Pawnee Fire Department

## Application Information

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

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

Date of birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Drivers License#: \_\_\_\_\_ Class: \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_

Married?: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_

Education: High School (diploma or GED required) \_\_\_\_\_ College: \_\_\_\_\_

College Major: \_\_\_\_\_ (or any course work that may  
Be helpful to the department.)

Can you attend business meetings?: \_\_\_\_\_ (business – 1<sup>st</sup> Wed., fire training –  
3<sup>rd</sup> Wed., EMS training – 4<sup>th</sup> Wed.)

Employer: \_\_\_\_\_ Shift: \_\_\_\_\_

Any physical impairments?: \_\_\_\_\_

Are you afraid of heights?: \_\_\_\_\_ Are you claustrophobic?: \_\_\_\_\_

Any first aid or EMT training?: \_\_\_\_\_

Any previous fire department or EMT experience?: \_\_\_\_\_

Accidents or moving violations in the last 5 years?: \_\_\_\_\_

Best times to contact you: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant