



Martindale Fire / Rescue

Caldwell County Emergency Services District No. 3

111 Lockhart St. ♦ P.O. Box 508
 Martindale, Texas 78655
 Phone/Fax: (512) 357-2389
<http://www.MartindaleFire.com>

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No:	Date of Birth:	
Position Applying for: <input type="checkbox"/> Volunteer Firefighter <input type="checkbox"/> Volunteer Medical Responder <input type="checkbox"/> Part-Time Firefighter <input type="checkbox"/> Water Rescue Team			
Are you a citizen of the United States?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain	
Do you currently work for a Fire/EMS agency?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, where?	
Do you have Fire or EMS experience?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, when & where?	
Do you have a current structural T.C.F.P. Cert?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, years of service?	
Do you have a current Texas EMT License?	YES <input type="checkbox"/> NO <input type="checkbox"/>	<input type="checkbox"/> EMT-Basic <input type="checkbox"/> EMT-Intermediate <input type="checkbox"/> Paramedic	
Check all applicable certifications: <input type="checkbox"/> Class B <input type="checkbox"/> D/O <input type="checkbox"/> Swift Water <input type="checkbox"/> Wildland <input type="checkbox"/> Officer 1			

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Phone
Relationship	
Full Name	Phone
Relationship	
Full Name	Phone
DISCLAIMER AND SIGNATURE	
<p>The following signature certifies that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p> <p>This signature also allows Martindale Fire Rescue and Caldwell County E.S.D. No. 3 to complete a background check with any information provided.</p>	
Signature	Date