

## East Holmes Fire & EMS District

P.O. Box 428 Berlin OH 44610-0186

## Application for Employment/Membership

Date of Application Social Security Number
Last Name: First Name: Middle Initial
Present Address: Street
City State Zip Code:
Telephone Number
Current Primary Employer:
Will Employer release you for calls? Yes No
Do you have a High School Diploma or Equivalent? Yes No
Have you ever been convicted of a felony? Yes No
If yes please explain:
Do you have a valid Ohio Operator's License? Yes $\Box$ No $\Box$
Do you have a Commercial Driver's License? Yes \( \sqrt{No} \) No \( \sqrt{No} \)



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Yes \( \square\) No \( \square\)	e United States Military?	
Are you physically or otherwise unable to perform the duties of the job for which you are applying? Yes \( \square \) No \( \square \) I certify that answers given herein are true and complete to the best of my knowledge.		
Signature of Applicant	Date	
Approved □ Not Approved □		
Chief:		
East Homes Fire & EMS Board President		
Date		