

# Lake Cunningham Fire Department

An Equal Employment Opportunity/Affirmative Action Employer

Lake Cunningham Fire Department  
2802 N. McElhaney Road  
Greer, SC 29651

LAKE CUNNINGHAM FIRE DEPARTMENT IS AN EQUAL OPPORTUNITY EMPLOYER; WE ADHERE TO A POLICY OF MAKING EMPLOYMENT DECISIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, DISABILITY OR AGE. WE ASSURE YOU, THE APPLICANT, THAT YOUR OPPORTUNITY FOR EMPLOYMENT DEPENDS SOLELY ON YOUR QUALIFICATION.

\*Applicants applying for positions with the Fire Department are required to meet minimum qualifications or an equivalent combination of training and experience in reference to the position which they apply, before an application may be given consideration. Applicants will be subject to a background investigation and Firefighter Registration through the South Carolina Fire Marshal's Office per provisions of Title 40, Chapter 80, of the South Carolina Code of Laws.

## Use Black Ink Only – Please Print

Name \_\_\_\_\_  
(Last) (First) (M) (Social Security #)

Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Phone No. (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

List the position which you wish to apply for: \_\_\_\_\_

When could you begin employment? \_\_\_\_\_

Please list machinery or equipment you can operate: \_\_\_\_\_

## EDUCATION:

Circle the highest year completed:

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19

Circle highest level completed:

HS Diploma/Equivalent; Associate; Bachelors; Masters; Doctorate; Law

Major: \_\_\_\_\_

Please list any job related certifications or licenses you currently hold:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime other than minor traffic violations? \_\_\_\_\_

Date	Where Convicted	Nature of Charge	Disposition
------	-----------------	------------------	-------------

\_\_\_\_\_

## EMPLOYMENT HISTORY

### Note:

1. Resumes are accepted, but application must be filled out in its entirety.
2. Incomplete applications will not be processed.
3. Begin with your most recent position. List all positions held. Include all military service, if any.

Name of Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Title: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Name and Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_  
Duties: \_\_\_\_\_

Name of Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Title: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Name and Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_  
Duties: \_\_\_\_\_

Name of Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Title: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Name and Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_  
Duties: \_\_\_\_\_

Name of Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Title: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Name and Title of Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_\_  
Duties: \_\_\_\_\_

---

List three (3) references, who are not relatives, that you have known for at least two years. Complete mailing address required.

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### PLEASE READ THIS STATEMENT CAREFULLY

I do hereby affirm that all the information provided by me in this application are true, complete and accurate; any misrepresentation, omission, or untrue statements may result in my being disqualified from consideration or termination if hired; my background may be investigated; I may be required to undergo fingerprinting; I may be required to pass a physical examination depending on the nature of the job; I authorize all employers to answer any and all information asked and information sought in connection with the application. If I have indicated my present employer not be contacted, an offer of employment may be conditioned upon acceptable information and verification from that employer.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_