



## OZARK FIRE PROTECTION DISTRICT

Jarett Metheny

*Fire Chief*

*jmetheny@ozarkfire.org*

604 N. 3<sup>rd</sup> Street      PHONE: (417) 581-4436  
P. O. Box 917          FAX: (417) 581-4496  
Ozark, MO 65721      WEB: www.ozarkfire.org

Dear Firefighter Applicant:

Thank you for your interest in becoming a member of the Ozark Fire Protection District. To determine your eligibility, which is the first step in our application process, you must submit the following information before the established and published deadlines listed on the job announcement for this position (if applicable). For your convenience, we are listing all necessary application documents.

- Completed and signed **Application for Employment**
- Completed and signed **Request for Criminal Background Check**
- Completed and signed **Firefighter Application Addendum**
- Professional **Resume** with three professional references
- Proof of current **Fire Certification** (*one of the following*)
  - Copy of Missouri Division of Fire Safety Firefighter II Certificate
  - Copy of Missouri Division of Fire Safety Letter of Verification
  - Copy of IFSAC or ProBoard Seal issued from another state
- Proof of current Missouri **Emergency Medical Technician-Basic** or higher
- Copy of current **Cardiopulmonary Resuscitation (CPR) Card**.
- Copy of current state issued Driver's License
- Successful completion of **Tri-State Recruitment Alliance** pre-employment testing within the past 12 months, **OR successful completion within the probationary period.**

Submitting copies of any documents not listed above may significantly delay the review of your application and may render your application invalid thereby disqualifying your application.

Completed applications may be mailed, faxed, emailed, or delivered in person. Please refer to the information below when submitting your application. If faxed, emailed, or mailed, please call to verify it was received.

**Mail or Deliver**

604 N. 3<sup>rd</sup> Street  
Ozark, MO 65721

**Fax**

(417) 581-4496

**Email**

jobs@ozarkfire.org

If you meet the above, the Ozark Fire Protection District will request additional information as the process continues. Successful candidates will be invited to interviews on Thursday, January 19, 2023.



# Ozark Fire Protection District

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 Ozark, MO 65721 www.ozarkfire.org

### INSTRUCTIONS:

Type or print your answers to all questions listed on the application. The Ozark Fire Protection District requires that all individuals interested in employment complete an official application and will accept a professional resume as a supplement to the application form. Applicants must attach copies of all supporting documentation to the official application.

## SECTION I: Personal Information

Position for which you are applying (one per application):

Full-Time  Part-Time  Volunteer \_\_\_\_\_

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

Please tell us, how did you find out about this position?

OFPD Website  Other Website: \_\_\_\_\_  OFPD Employee: \_\_\_\_\_  
 Published Ad  Other: \_\_\_\_\_

Please complete (enter all applicable information and check one preferred method of contact):

Home Phone \_\_\_\_\_  Work Phone \_\_\_\_\_  
 Cell Phone \_\_\_\_\_  E-Mail Address \_\_\_\_\_

Name (first) (middle) (last)

Street Address Apt./Suite

Have you ever worked for the Ozark Fire Protection District?

Yes  No

City State Zip Code

When \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 to \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 When \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Are you legally authorized to work in the U.S.?

Yes  No

Can you provide evidence of your eligibility to work?

Yes  No

Do you have relatives employed by the Ozark Fire Protection District?  Yes  No

If so, list name(s) and relationship(s)? \_\_\_\_\_

Do you have a valid Missouri Driver's License?  Yes  No

The Ozark Fire Protection District may verify all information, including moving violations.

High School / G.E.D. Do you have a High School Diploma or G.E.D. Certificate?  Yes  No  
 Prior to an interview, the district may require official copies of college or university transcripts or High School or G.E.D. certificate or Diploma, or professional certificates.

College or University	Name	Location	Dates (To and From)	Credit Hours Earned
		Major	Minor	Type of Degree
College or University	Name	Location	Dates (To and From)	Credit Hours Earned
		Major	Minor	Type of Degree
College or University	Name	Location	Dates (To and From)	Credit Hours Earned
		Major	Minor	Type of Degree

List all applicable certificates and/or licenses. \_\_\_\_\_  
 (you may attach a separate sheet if needed)

## SECTION II: Employment Record

Beginning with current or most recent dates, provide a comprehensive description of your professional experience.  
If you require additional space, attach an additional sheet to this document.

**Current or Most Recent Employer** \_\_\_\_\_  
**Starting Date** \_\_\_\_\_ **Ending Date** \_\_\_\_\_ **Total Time Employed** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City/State** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Title** \_\_\_\_\_ **Starting Salary** \_\_\_\_\_ **Ending Salary** \_\_\_\_\_  
**Duties** \_\_\_\_\_  
\_\_\_\_\_  
**Reason for Leaving** \_\_\_\_\_

**Employer** \_\_\_\_\_  
**Starting Date** \_\_\_\_\_ **Ending Date** \_\_\_\_\_ **Total Time Employed** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City/State** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Title** \_\_\_\_\_ **Starting Salary** \_\_\_\_\_ **Ending Salary** \_\_\_\_\_  
**Duties** \_\_\_\_\_  
\_\_\_\_\_  
**Reason for Leaving** \_\_\_\_\_

**Employer** \_\_\_\_\_  
**Starting Date** \_\_\_\_\_ **Ending Date** \_\_\_\_\_ **Total Time Employed** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City/State** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Title** \_\_\_\_\_ **Starting Salary** \_\_\_\_\_ **Ending Salary** \_\_\_\_\_  
**Duties** \_\_\_\_\_  
\_\_\_\_\_  
**Reason for Leaving** \_\_\_\_\_

**Employer** \_\_\_\_\_  
**Starting Date** \_\_\_\_\_ **Ending Date** \_\_\_\_\_ **Total Time Employed** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City/State** \_\_\_\_\_ **Phone** \_\_\_\_\_  
**Title** \_\_\_\_\_ **Starting Salary** \_\_\_\_\_ **Ending Salary** \_\_\_\_\_  
**Duties** \_\_\_\_\_  
\_\_\_\_\_  
**Reason for Leaving** \_\_\_\_\_

**Have you ever been convicted, plead guilty or no contest, or placed on deferred adjudication or probation for any offense other than traffic violations?**

Yes       No

**Provide details (charges, penalties, where, when, and disposition)** \_\_\_\_\_  
\_\_\_\_\_

**By signing below, I certify, authorize, or acknowledge:**

That all of the information provided by me on this application for employment and any attachments or supporting documents I submit are accurate. Recognizing that the Ozark Fire Protection District may rely upon information I provide to make an employment decision, I hereby certify that all information herein presented is accurate and free from intentional omission, falsification, or misleading information.

I authorize the Ozark Fire Protection District to conduct background, personal, criminal, employment history, or any type of investigation it may require to determine of my fitness for the position for which I have applied. Additionally, I understand that the District may require a physical, mental, or drug pre-employment screening after the District has made me a conditional offer for employment.

**Usual Signature of Applicant**

**Printed Name of Applicant**

**Date**



**OZARK FIRE PROTECTION DISTRICT**

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Phone: (417) 581-4436

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**REQUEST FOR CRIMINAL BACKGROUND CHECK**

**NAME:** \_\_\_\_\_  
Last First Middle Jr. / Sr.

**MAIDEN / ALIAS:** \_\_\_\_\_  
Last First Middle Jr. / Sr.

**SEX:**  Male  Female **DOB:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ **SSN:** \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**RACE:**  Caucasian  Black  Hispanic  Asian  Other \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
Street / P.O. City State Zip Code

**REQUESTING ENTITY**

OZARK FIRE PROTECTION DISTRICT  
P. O. BOX 917  
OZARK, MO 65721  
(417) 581-4436

NON-PROFIT POLITICAL SUBDIVISION

**REQUEST FOR:** \_\_\_ EMPLOYMENT \_\_\_ VOLUNTEER

This Criminal History Record Check document, signed by the applicant, will serve as written consent to check criminal records and offender information by the requestor. The information obtained shall be confidential and any person who discloses the information beyond the scope allowed in Sections 43, 540 and 589.400 RSMo., shall be subject to prosecution for a Class A misdemeanor.

Signature of Subject of Request

Date



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