



EMPLOYMENT APPLICATION

THE CITY OF WEST WENDOVER IS AN EQUAL OPPORTUNITY EMPLOYER

City of West Wendover • 801 Alpine Street – P.O. Box 2825 • West Wendover, Nevada 89883

Phone: (775) 664-3081 Fax: (775) 664-3720

Review the minimum qualifications listed on the job announcement. If you feel you qualify, complete this application. **BE THOROUGH AND FILL IN ALL ITEMS.** Your answers will determine whether or not you will continue in the screening process. Your completed application, together with all supplementary materials specified on the job announcement, must be received by the City of West Wendover Personnel Office no later than 4:30 p.m. on the closing date specified on the job announcement. Incomplete, undated or unsigned applications will not be processed. We are not liable for materials lost or delayed in the U.S. Mail. **Faxed applications are accepted, unless the recruitment is limited.** City of West Wendover fax number is (775) 664-3720.

PRINT IN BLACK INK OR TYPE & SIGN ON THE LAST PAGE

Position Applied for: _____ Job Code Number: _____

Name: _____
Last First Middle Social Security Number

Address: _____
Mailing & Physical City State Zip

Telephone: () - _____ Cellular/Beeper #: () - _____

Are you currently employed by the City of West Wendover? No Yes

Have you previously worked for the City of West Wendover? No Yes

If "Yes," give dates. From: _____ To: _____

Are you a Nevada PERS retiree? No Yes

Do you have any relatives employed by the City of West Wendover? No Yes

If "Yes," give name and relationship:
Name: _____ Relationship: _____

Do you have the legal right to work in the United States? No Yes

Other than a minor traffic violation, have you ever been convicted of any offense? No Yes
Please include date of conviction, city, and state. DUI and reduction of DUI convictions **must** be included. (Conviction of a crime is not necessarily a bar to employment.) If "Yes," please explain:

Do you possess a valid driver's license?* No Yes If "Yes," complete the following:

Type of License: _____ License #: _____

* If Commercial, state type with endorsements.

Issuing State: _____ Expiration Date: _____

EDUCATION

When claiming college, business, or vocational school credits for meeting minimum qualifications, you may be required to submit a copy of your degree or a legible photocopy of your up-to-date transcript with this application. Failure to do so may delay processing or disqualify your application. All papers submitted become the property of the City of West Wendover Personnel Office and cannot be returned.

Do you have a high school diploma? No Yes If "Yes,"

School Name: _____

Location: _____

If "No," do you have a GED certification? No Yes

If "No," indicate highest grade completed: _____

LIST COLLEGES/UNIVERSITIES ATTENDED AND ANY SPECIAL TRAINING RECEIVED

College Name & Location	Date From (Mo/Yr)	Date To (Mo/Yr)	Field of Study	Credit Hours Completed	Degree or Certificate
			Major: Minor:		
			Major: Minor:		
			Major: Minor:		
Business/Trade School	From (Mo/Yr)	To (Mo/Yr)	Subject	Certificate	

LIST ANY OTHER VALID LICENSES AND CERTIFICATES YOU HOLD:

Type of License or Certificate	Issuing State	Registration Number	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EXPERIENCE

On the following sheets, list the employers, assignments or volunteer activities that you have held, starting with your most recent one. THIS SECTION MUST BE COMPLETED IN DETAIL. PROVIDE A MINIMUM OF 10 YEARS' WORKING EXPERIENCE AND DO NOT LEAVE ANY GAPS IN EMPLOYMENT. FAILURE TO DO SO MAY DELAY PROCESSING OR DISQUALIFY YOUR APPLICATION. YOU ARE ENCOURAGED TO ATTACH A RESUME IF YOU WISH, BUT REFERENCE TO A RESUME IN LIEU OF COMPLETING THIS SECTION CANNOT BE ACCEPTED. Under "Work Performed" describe your job in sufficient detail so that we can determine not only your tasks, but the level of responsibility. If reference is made to military service, describe each different assignment (DD214 must be attached). If you wish to add more experience or wish to add more detail to the "Work Performed," please complete and attach an Experience Addendum Sheet. Jobs and/or volunteer experience listed may require verification.

FROM (Mo/Yr): TO (Mo/Yr):	EMPLOYER:
JOB TITLE:	TELEPHONE # and ADDRESS:
IMMEDIATE SUPERVISOR:	NATURE OF WORK PERFORMED/RESPONSIBILITIES:
TITLE:	
MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> No <input type="checkbox"/> Yes	
SALARY:	REASON FOR LEAVING:

FROM (Mo/Yr): TO (Mo/Yr):	EMPLOYER:
JOB TITLE:	TELEPHONE # and ADDRESS:
IMMEDIATE SUPERVISOR:	NATURE OF WORK PERFORMED/RESPONSIBILITIES:
TITLE:	
MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> No <input type="checkbox"/> Yes	
SALARY:	REASON FOR LEAVING:

FROM (Mo/Yr): TO (Mo/Yr):	EMPLOYER:
JOB TITLE:	TELEPHONE # and ADDRESS:
IMMEDIATE SUPERVISOR:	NATURE OF WORK PERFORMED/RESPONSIBILITIES:
TITLE:	
MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> No <input type="checkbox"/> Yes	
SALARY:	REASON FOR LEAVING:

FROM (Mo/Yr): TO (Mo/Yr):	EMPLOYER:
JOB TITLE:	TELEPHONE # and ADDRESS:
IMMEDIATE SUPERVISOR:	NATURE OF WORK PERFORMED/RESPONSIBILITIES:
TITLE:	
MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> No <input type="checkbox"/> Yes	
SALARY:	REASON FOR LEAVING:

How did you learn about this position?

- (NW) Newspaper, Magazine, or Journal—Which one? _____
- (CO) Community Organization—Which one? _____
- (SC) School/College Placement Office—Which one? _____
- (RT) Radio or TV Station—Which one? _____
- (SE) State Employment Department
- (HR) City Human Resources Department
- (EM) City Employee
- (FR) Friend or Relative
- (IN) Internet
- (OT) Other (please specify) _____

This application will be used for one position only. If you wish to apply for other positions with the City of West Wendover, submit an application for each position. Reference on this application to materials submitted with other applications cannot be considered. Since the information you submit on this application may be the entire examination process, your failure to provide complete information could delay or even disqualify you from consideration. It is your responsibility to notify the Personnel Office, in writing, of any changes in address or phone number.

I certify that the statements made by me on this application are, to the best of my knowledge, true, complete and correct. If employed, I understand that any misrepresentation or material omission of fact on this or any other document required by the City may be considered as constituting grounds for disqualification and/or dismissal. I further understand that any offer of employment is subject to successful completion of a physical examination (including drug screening) and background investigation. Additionally, any individual offered employment may be required to demonstrate the ability to perform the physical requirements of the job. I therefore authorize the City's assigned doctor to release to the City any information regarding my physical examination and/or pre-employment screening. Having applied for employment with the City of West Wendover, I do hereby agree and do give my consent that any person, firm or organization listed hereon is authorized to furnish the City with personal or reference material concerning my character, past employment, or any other information they so request. In addition, I do hereby agree and give my consent for the City to conduct an investigation of my credit history. I further agree and hereby give my consent for the City to furnish any statistical data regarding this application that may be required for compliance with the Equal Employment Opportunity guidelines.

Signature _____ Date _____

EXPERIENCE ADDENDUM

Under "Work Performed" describe your job in sufficient detail so that we can determine not only your tasks, but the level of responsibility. If reference is made to military service, describe each different assignment (DD214 must be attached). Jobs and/or volunteer experience listed may require verification.

FROM (Mo/Yr): TO (Mo/Yr):	EMPLOYER:
JOB TITLE:	TELEPHONE # and ADDRESS:
IMMEDIATE SUPERVISOR:	NATURE OF WORK PERFORMED/RESPONSIBILITIES:
TITLE:	
MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> No <input type="checkbox"/> Yes	
SALARY:	REASON FOR LEAVING:

FROM (Mo/Yr): TO (Mo/Yr):	EMPLOYER:
JOB TITLE:	TELEPHONE # and ADDRESS:
IMMEDIATE SUPERVISOR:	NATURE OF WORK PERFORMED/RESPONSIBILITIES:
TITLE:	
MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> No <input type="checkbox"/> Yes	
SALARY:	REASON FOR LEAVING:

FROM (Mo/Yr): TO (Mo/Yr):	EMPLOYER:
JOB TITLE:	TELEPHONE # and ADDRESS:
IMMEDIATE SUPERVISOR:	NATURE OF WORK PERFORMED/RESPONSIBILITIES:
TITLE:	
MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> No <input type="checkbox"/> Yes	
SALARY:	REASON FOR LEAVING:

Signature _____ Date _____

**OPTIONAL
EQUAL EMPLOYMENT OPPORTUNITY SURVEY**

The following information is necessary for the City of West Wendover to evaluate its recruiting and hiring practices and to prepare reports required by law for the State and Federal Government. This information will be used solely for research and statistical purposes and in no way affects any employment decision. Your **voluntary** cooperation will be appreciated. Please check the appropriate box beside Male or Female, and under ethnic categories, check the one that most nearly describes your ethnic background. **Please print or type.**

Position Applied for: _____ Job Code: _____

Name: _____
Last
First
Middle

Gender: Female Male Date of Birth: _____ / _____ / _____
Month
Day
Year

"AMERICAN NATIVE OR ALASKAN NATIVE" includes persons having origins in any of the original peoples of America.

"ASIAN or PACIFIC ISLANDERS" includes persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Pacific Islands (example: China, Japan, Korea, the Philippine Islands and Samoa.)

"AFRICAN AMERICAN" includes persons having origins in any of the Black racial groups.

"HISPANIC" includes persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish descent.

"WHITE" includes persons having origins in any of the original peoples of Europe, North Africa, the Middle East, or the Indian Subcontinent.

Check Only One Box

American Native or Alaskan Native (I)	Asian or Pacific Islanders (A)	African American (B)	Hispanic (H)	White (W)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you require reasonable accommodations during the application and/or testing process? No Yes

If yes, please identify your needs:

FOREIGN LANGUAGES: Please note your knowledge of any foreign languages and indicate your level of competence in each by placing an "X" in the appropriate column:

LANGUAGE	SPEAKING (1)			UNDERSTANDING (2)			READING (3)			WRITING (4)		
	FLUENT	GOOD	FAIR	FLUENT	GOOD	FAIR	FLUENT	GOOD	FAIR	FLUENT	GOOD	FAIR
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**CITY OF WEST WENDOVER
FIRE FIGHTER
ORIENTATION, JOB DESCRIPTION & SUPPLEMENTAL QUESTIONNAIRE**
(Attach all documents to application)

Orientation

This orientation is to provide for you the steps in becoming a West Wendover Part Time/Volunteer Fire Fighter and, to give you an idea of what the Fire Department is about and what is expected from you as a member. Your time is appreciated in looking into the possibility of becoming a West Wendover Volunteer/Part Time Firefighter. As part of the process in becoming a Fire Fighter you will need to complete the following steps:

16. Arrange to have an interview with the Fire Chief where you will be introduced to the Who, What, Where, When, Why and How of fire service. In addition, during this interview, it will be determined if the applicant has the available time to train and respond to alarms. The training will be held every other week, one week having two days of certifiable training and the other having just one day, this makes three days a month. The Firefighter will have some non-certifiable extra training and duties that need to be performed at the fire fighters convenience, i.e., learning the City streets, casinos, hotels, sprinkler systems, hydrant locations, driver's training and much more. On occasion there may be schools that are held out of town and if available, the firefighter may attend at the City's expense. Alarms cannot be scheduled therefore by just applying as a Part Time/Volunteer you are agreeing that whenever there is an alarm, you will respond as long as it doesn't interfere with your job or other excused reasons for not responding.
17. Review the position job description and requirements and then fill out the employment application and supplemental questionnaire and return them to the City Office.
18. Schedule an employment interview with the City's Human Resources to review your application materials for completeness and to begin the employment "in-processing" which will include several conditions to your employment. These conditions include satisfactory completion of:
 - a. Pre-employment drug/alcohol testing.
 - b. Employee physical
 - c. Background investigation
 - d. And any other identified requirements at the time of your employment
19. Once you have finished your "in-processing" you will be able to report to the Fire Station and be suited up to start your training.

Job Description

FIREFIGHTER JOB DESCRIPTION AND RESPONSIBILITIES

1. Protecting life and property through the prevention and extinguishing of fires and the precaution to prevent rekindle.
2. Preservation of evidence to determine the cause of fire.
3. Inspection surveys for pre-fire planning.
4. Do not ever release the cause or possible cause of fires to any individual, but instruct such persons to contact the chief officer.
5. Respond with their units to all alarms and emergency calls and perform such duties as required.
6. Maintain fire apparatus, tools and equipment in a clean and serviceable condition at all times.
7. Keep the fire stations and premises neat, clean and in good order.
8. Perform related work as required by company officers.
9. Be familiar with and obedient to rules, regulations, orders, directives and operating instructions affecting the operation of the fire department.
10. Keep in readiness to perform duty and do not be absent from the place of duty or assignment without specific permission from the company officer.
11. Exercise precautionary measures to avoid injury while in the performance of duty.
12. Exercise precautionary measures to avoid unnecessary damage to or loss of property.
13. Be responsible for the safe keeping and proper care of all fire department property in their charge.
14. Accord obedience, respect and courtesy to superiors and to those performing duties of a higher rank.
15. Promptly notify the superior officer of any inability to report for duty at the time required.
16. Accept the responsibility to act in a position of higher rank.
17. Report to supervisors any accident, sickness or injury while on duty no matter how trivial the incident may appear.
18. Notify the supervisor within 24 hours of any change of residence or telephone number.
19. Keep self, uniforms, protective clothing, beds and lockers in a neat and clean condition.
20. Participate in drills and other fire department training activities as directed.
21. Become thoroughly familiar with all the equipment and it's operation.
22. Do not falsify records, make misleading statements, deceive, or willfully mutilate records.
23. Know of all disciplinary actions, which may be taken.

MINIMUM JOB REQUIREMENTS

Be at least 18 years of age at the time of employment.

Maintain a valid Nevada or Utah Drivers License with a Nevada Emergency Operators Certification. Our Insurance Company must approve your driving record.

Be able to pass the Heart and Lung Bill for physical requirements at the next regular scheduled test given by the fire department.

No criminal record.

Good vision hearing, speech, and manual dexterity and may be required to use arduous physical strength.

Need available time to attend monthly scheduled training classes to maintain certification and respond to alarms as required.

Will be required to take a drug and alcohol test or any other requirements as per City Policy.

Will be required to complete a physical examination.

Supplemental Questionnaire

Print or Type Clearly.

Applicant Name: _____

Address: _____

Complete mailing & physical address. _____

Daytime Phone: _____ **Evening Phone:** _____ **Mobile:** _____

Which number is best to contact you? Day Evening Mobile

E-mail address: _____

This form does not in any way imply or guarantee a contract or promise of employment with the City of West Wendover. All applicants must take and pass all phases of the selection process to continue. Failure to attend or pass any section of the selection process will result in applicant being removed from further consideration.

Upon completion of certain portions of the hiring process, applicants may be required to submit to a background investigation, supply appropriate release waivers for information, submit to fingerprinting and verification of education and references.

Below are listed a number of tasks required of Fire Fighters. Indicate your acknowledgement by putting an “X” or check mark in the appropriate box.

As a Part Time Fire Fighter, I am willing and able to:	YES	NO
1. Maintain the highest standard of integrity and ethics.		
2. Provide honest and professional service without partiality.		
3. Demonstrate initiative and desire to work in a problem solving environment.		
4. Keep information confidential and not share it inappropriately.		
5. Work without immediate supervision.		
6. Perform routine, repetitive tasks, including typing, completing reports, etc.		
7. Work weekends (Saturday & Sunday).		
8. Respond to call outs (day & night), outside of other full-time employment.		
9. Respond on holidays if necessary, outside of other full-time employment.		
10. Participate in required training on a weekly basis – Wednesday nights.		

Answer the following questions: *(If an explanation is necessary, limit your response to one page per question.)*

11. Have you ever left a job without giving advance notice? **YES NO**
If yes, please explain.

12. Have you ever resigned or been discharged as a result of misconduct? **YES NO**
If yes, please explain.

16. All candidates must possess a satisfactory work record with their current and past employers. Only those with a satisfactory work will be considered for employment. Each case will be examined on the basis of job relatedness and recency. Do you possess a satisfactory work record including performance evaluations with your current and past employers?

YES NO

Explain in detail any terminations and/or resignations in lieu of termination.

17. Provide all details of any misdemeanor or felony convictions (i.e.; date of occurrence, circumstances, sentence received, current status, etc.). Each case will be examined on the basis of job relatedness and recency.

15. Provide a list of all traffic violations in the past 5 years.

16. The City of West Wendover requires its employees to be free from illegal drug use. Have you used illegal drugs?

If yes, explain in detail.

YES NO

Applicants Signature

Date