

CITY OF EULESS FIRE DEPARTMENT TESTING

"Job Interest Form for Fire/EMS Service Applicants"

Name: _____
Last First Middle

SSN: _____

Address: _____

City State ZIP Code

Contact: _____
Home Work/Cell Email

CHECK ALL APPLICABLE CURRENT LEVELS:
ALL APPLICANTS MUST PROVIDE PROOF OF CURRENT LEVEL OF CERTIFICATION
WHEN SUBMITTING THIS FORM.

____ Certified/Certifiable Firefighter/Paramedic
Note: Certifiable Fire Fighter denotes that you have completed a State Approved Fire Academy, but have not been employed by a Fire Department

____ Paramedic (Texas or National Registered)

____ Certified Firefighter/Paramedic Student *
(within 180 days of graduation)

***IF IN PARAMEDIC SCHOOL, STUDENTS MUST PROVIDE ENROLLMENT INFO VERIFIED BY COURSE COORDINATOR ON OFFICIAL LETTERHEAD:**

Verification letter shall include:

- Location of Course
- Date of Course Completion
- Contact Phone Number of Course Coordinator
- Verification of Good Standing in the Course

Job Interest Form and copies of applicable certifications will be submitted via e-mail or in person by Noon on January 7, 2019 to:

City of Euless – Fire Department Administration
201 North Ector Drive
Euless, TX 76039-3595
Phone: 817-685-1600 FAX: 817-685-1816
trenteria@eulesstx.gov

Once certification information is verified, we will e-mail you, or you can pick up a background information packet. The background information packet will be due at the written exam. They can also be turned in to fire administration any time prior to the written exam.

An Equal Opportunity Employer

For Office Use Only: Date _____ Time _____ Received _____